



Contractors Supplemental Application – Elevator

This application is intended for use with a completed Acord application and is not intended as a free-standing application. No proposals of insurance will be considered without a completed Acord application.

Applicant Name _____

Part 1: Construction Activity History:

1. Years in business under current name _____
2. What states are you licensed to do business in? _____
3. What cities or counties do you mainly work in? _____

4. What percentage of your work is

a) New construction	_____%
b) Remodel/Repair	_____%
5. On a typical project, what percentage of your work is performed by

a) Your employees	_____%
b) Leased employees	_____%
c) Sub-contractors under your supervision	_____%

 If you lease employees, is the payroll included in your application? Yes / No

Part 2: Types of Work Performed:

1. Please provide the type of work performed as a percentage of total operations.

a. Maintenance	_____%	b. Repair	_____%	c. Inspection	_____%
d. Modernization	_____%	e. Manufacturing	_____%	f. Installation	_____%
g. Other	_____%				
2. Please provide the percentage breakdown of jobs under contract.

a. Maintenance	_____%	b. Parts, oil & grease	_____%	c. Oil & grease	_____%
d. Inspection	_____%	e. Other	_____%		

 Describe any "Other" _____

3. Do you work on any mechanical lifts other than elevators? Yes / No
 If yes, indicate percentage of income by type below.

a. Escalators	_____%	b. Conveyors	_____%	c. Belt Lines	_____%
d. Window Washers	_____%	e. Dumbwaiters	_____%	f. Other	_____%
4. Do you manufacture any products? Yes / No
 If yes, describe. _____

5.

a. Do you perform work on construction elevators?	Yes / No
If yes, what is the percent of income	_____%
b. Do you perform work on Housing Authority Projects?	Yes / No
If yes, what is the percent of income	_____%

- c. Do you perform work on garage elevators? Yes / No
If yes, what is the percent of income _____%
- 6. Have you ever done work for a municipality or other government agency? Yes / No
If yes, describe: _____
- 7. Do you keep maintenance records indicating the dates of service calls, the length of service calls, and the work performed? Yes / No
How long do you keep these records? _____
Where are these records kept? _____
- 8. Do you perform work below grade? Yes / No
If yes, what percent? _____%
Please describe: _____
- 9. Upon seeing a potential problem at a job site that is the building owners responsibility, do you inform the building owner of the condition IN WRITING? Yes / No
- 10. When a trouble call is received and the problem is serious, is the caller instructed to shut down the elevator immediately? Yes / No
- 11. Describe your procedure for handling inspection citations. _____

Part 3: Subcontracted Work History

- 1. If you **NEVER** hire subcontractors check here and move on to part 4. _____
- 2. Do you always require your subcontractors to sign a hold-harmless or indemnification agreement in your favor? Yes / No
- 3. Do you utilize a standard contract with all of your subcontractors? Yes / No
- 4. a) Do you require your subcontractors to carry General (Public) Liability insurance? Yes / No
b) Do you require that you are named as an *Additional Insured* on their policies? Yes / No
c) What minimum limits of insurance do you require your subcontractors to carry? _____
d) Do you require your subcontractors to carry Workers Compensation insurance? Yes / No
e) Do you request certificates of insurance from your subcontractors to verify compliance with the above? Yes / No

Part 4: Historical Exposure Basis

1. Please complete the following chart as accurately as possible

<u>Policy Year</u>	<u>Gross Receipts</u>	<u>Gross Payroll</u>	<u>Subcontracted Costs</u>
Current term	_____	_____	_____
1 st Prior term	_____	_____	_____
2 nd Prior term	_____	_____	_____
3 rd Prior term	_____	_____	_____
4 th Prior term	_____	_____	_____
5 th Prior term	_____	_____	_____

2. Please describe the five largest projects undertaken by you in the last five years.

	<u>Description</u>	<u>Job Cost</u>	<u>Project Duration</u>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____

3. Please describe the three largest projects planned for the upcoming year.

	<u>Description</u>	<u>est. Job Cost</u>	<u>est. Project Duration</u>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____

Part 5: Supplemental Information

1. Are you involved in any other business besides elevators? Yes / No
If yes, describe. _____

2. Do you now or have you ever carried either "Professional Liability" or "Errors and Omissions" insurance? Yes / No
If yes, provide the carrier, policy term and limits of liability and note any losses. ____

3. Have you now or ever been involved in or are aware of pending litigation concerning defective workmanship? Yes / No
If yes, describe. _____

4. Any additional Comments: _____

To the best of my knowledge the information included by me on this supplemental application is correct.

Applicant's Signature _____ Dated ____/____/____

Applicant's Name _____
(Please Print)