APPLICATION DATE	NEED BY DATE	PROPOSED EFFECTIVE DAT		

CONTRACTORS & CONSULTANTS APPLICATION

SECTION A: APPLICANT INFORMATION									
APPLICANT									
MAILING ADDRESS			CITY		STATE	ZIP CO	DE		
PHYSICAL ADDRESS IF DI	FFERENT		CITY		STATE	ZIP CO	DE		
CONTACT NAME	CON	FACT E-MAIL	CONTACT PHONE	# WE	BSITE AD	DRESS			
COMPANY IS: Indivi	idual Cor	poration LLC F	Partnership 0	ther (Specify)					
PROVIDE BRIEF DESCRIPT	TION OF APPLICA	NT'S OPERATIONS:							
TROVIDE BRIEF DESCRIP	HON OF AFFEIGR	INT 5 OF ERATIONS.							
SECTION B: PERSONNEL									
1. Number of Officers	1. Number of Officers/Directors PLEASE ATTACH A STATEMENT OF QUALIFICATIONS/								
2. Number of Other K	ey Personnel		RESUME FOR AL	L OFFICERS, D	IRECTOR	S AND			
3. Total Number of Pe	ersonnel		KEY PERSONNE	L LISTED.					
4. Has any officer of		been the subject of disciplina			f profession	onal or co	ontracting		
activities?									
1. Date Established		licent have Subsidiaries	A parant comp	ony Othor	rolated on	tition If y	voc explain		
2. Does the applicant have Subsidiaries A parent companyOther related entities If yes, explain:									
3. Do you share employees? Yes No If yes, explain:									
4. Have there been any acquisitions, consolidations, dissolutions, mergers in the last 5 years? Yes No If yes, explain:									
SECTION D: REQUESTED	COVERAGE	Renewal	Ne	w Business					
COVERAGES	MOLD	LIMITS		DEDUCTIBLE		Р	ROPOSED		
CGL	015			220011322			RETRO		
CPL Claims Made	☐ Yes ☐ No								
CPL Occurrence	☐ Yes ☐ No								
Professional Liability	☐ Yes ☐ No								
Other	☐ Yes ☐ No								
Crawford Alacrity Hired & Non-Owned Auto TPL Endorsement Other (Specify) SECTION E: CURRENT/PRIOR LIABILITY CARRIER INFORMATION									
SECTION E. CORRENTA IX	IOP LIABILITY C					1	PREMIUM		
COVERAGES			LIMITS	DEDUCTIBLE	RF	ΓRO			
COVERAGES	CARRIER	MOLD	LIMITS	DEDUCTIBLE	RE	rro	PREWITOW		
			LIMITS	DEDUCTIBLE	RE	rro	PREIMION		
CGL		MOLD	LIMITS	DEDUCTIBLE	RE	TRO	PREMION		
CPL Occurrence		MOLD Yes No	LIMITS	DEDUCTIBLE	RE	TRO	PREMION		
CPL Occurrence CPL Claims Made		MOLD Yes No Yes No	LIMITS	DEDUCTIBLE	RE	rro	FREMION		

SECTION F: GROSS RECEIPTS PAST THREE (3) FISCAL YEARS FISCAL YEAR **RECEIPTS** Note: Gross Receipts are the total of all receipts, invoices and/or billings without 1st prior year any deductions. Please list your estimated gross receipts including work subcontracted to others for the next 12 months next to the appropriate category. 2nd prior year List services not described below under "Other" (be specific). 3rd prior year SECTION G: ENVIRONMENTAL CONTRACTING OPERATIONS Check here if this section does not apply **PROJECTED GROSS** % SUBBED **PROJECTED GROSS** % SUBBED **OPERATIONS OPERATIONS** TO OTHERS **REVENUE REVENUE** TO OTHERS Abatement Contracting -**PCB** Contracting Asbestos Abatement Contracting -Radon Mitigation Lead Abatement Contracting -Recycling - Hazardous Mold Materials Air Duct Cleaning Service Station Contracting Alternative Energy Contracting Sewage Waste Remediation Alternative Energy Contracting Soil Remediation (Petroleum) Wind Alternative Energy Contracting Soil Remediation (Other) Other Bio Remediation (Soil, Water) Soil Removal **Build Back/Restoration** Tank and Pipe Cleaning Debris Removal (Hazardous Tank - AST Contracting Materials) Debris Removal (Non Tank - UST Installation Hazardous/Waste) Contracting Tank - UST Removal Drilling Contracting Emergency/Spill Response -Trucking - Hazardous Fire (No Build Back) Materials Waste Contracting – Emergency/Spill Response (Rolling Stock/Vessel Spill) Hazardous Materials Fire & Water Damage Waste Contracting - Non-Restoration Work Hazardous Materials Waste Water Facility Fuel System Installation Operators Water Extraction **Groundwater Remediation** Wetlands Restoration and Illegal Drug Lab Cleanup Construction Other (Specify) Indoor Air Quality Other (Specify) Industrial Cleaning Lab Packing Other (Specify) and Sampling Other (Specify) Landfill Construction Other (Specify) Liner Installation Other (Specify) Liquid Waste Management and Treatment Medical/Infectious Waste/Crime Scene Cleanup **TOTALS FOR ENVIRONMENTAL** Mobile Incinerator **CONTRACTING** Mold Prevention

OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS	OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS
Appliance Installation	REVENUE	10 OTHERS	Interior Demolition/by Hand	REVENUE	10 OTHERS
Appliance Installation Boiler Inspections			(not more than 6 stories)		
and Installations			Janitorial Contents Cleaning		
Bridge or Elevated Highway Construction – Concrete			Machinery or Equipment – Installation, Service or Repair		
Bridge or Elevated Highway Construction – Iron or Steel			Masonry Contracting (No EIFS)		
Carpentry			Metal Erection Contracting – Decorative or Artistic		
Carpet, Rug, Furniture or Upholstery Cleaning			Metal Erection – Non Structural		
Concrete Construction – Foundation Work			Metal Erection – Structural		
Dredging			Millwright/Welders		
Drilling – Water			Painting		
Driveway, Parking Area or Sidewalk Paving or Repaving			Pile Driving Building Foundation Only		
Drywall or Wall Installation			Pile Driving – Sonic Method		
EIFS			Plastering or Stucco Work (No EIFS)		
Electrical Contracting			Plumbing		
Equipment Sales UST – Fueling			Pressure Washing		
Excavation			Refrigeration Systems or Equipment – Dealers		
Exterior Demolition of 4 Story Building			Rigging – Not ship or Boat		
Fencing			Roofing		
Fire Suppression Systems – Installation, Servicing /Repair			Salvage Operations		
Floor Covering Installation – Not Ceramic or Stone Tiles			Sewer Mains or Connections Construction		
Floor Covering Mfg Not Carpets, Rugs			Street Cleaning		
Framing			Street or Road Construction or Reconstruction		
Furniture Moving			Street or Road Paving or Repaving, Surfacing		
Gas Mains or Connections			Trucking		
General Contracting – Commercial & Residential			Water Mains or Connections Construction		
Glass Dealers & Glaziers (3 stories or less)			Waterproofing		
Glass Dealers & Glaziers (more than 3 stories)			Welding or Cutting (No Oil/Gas Pipeline)		
Grading of Land			Wrecking – Buildings No Explosives, Wrecking Balls		
HVAC			Wrecking – Exterior Demolition of 1 & 2 Story		
Industrial Cleaning, Maintenance			Other (Specify)		
Insulation Work – Mineral			Other (Specify)		
Insulation Work – Plastic			Other (Specify)		
Insulation Work – Organic or Plastic in Solid State			Other (Specify)		
Interior Demolition/by Hand (more than 6 stories)			TOTALS FOR NON- ENVIRONMENTAL		

SECTION I: PROFESSIONAL CONSULTING OPERATIONS			Check here if this section does not apply					
OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS		OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS		
Air Monitoring			Indoo (IAQ)	r Air Quality Consulting				
Alternative Energy Consulting Solar				rial Hygiene Consulting				
Alternative Energy Consulting Wind			Indust	rial Hygienists				
Alternative Energy Consulting Other			Lead	Consulting				
Asbestos Consulting			Mold	Analytical Laboratories				
Environmental Analytical Laboratories			Mold (Consulting				
Environmental Assessments (Phase I Surveys)			Mold I	nspections				
Environmental Assessments (Phase II Surveys)			Mold I Samp	Post Remediation ling				
Environmental Assessments (Phase III Surveys)			Project Desig	ct Remediation Mold n				
Environmental Audits			Projec	ct Supervision				
Environmental Expert Witness			Rador	n Testing				
Environmental Feasibility Studies			Consu					
Environmental Impact Studies				diation Project n/Consulting				
Environmental Litigation Support			Safety	/ Training Providers				
Environmental Manual Preparation			UST	Consulting & Testing				
Environmental Permitting/Compliance			Wetla	nds Delineations				
Environmental Remedial Investigation/Studies				nds Project n/Consulting				
Environmental Sampling				e Studies (Specify)				
Geophysical Consulting				(Specify)				
Geotechnical Consulting				(Specify)				
Hazardous Material Consulting								
Health & Safety Consulting			Other	(Specify)				
Hydro Geological Consulting				TOTALS FOR PROFESSIONAL OPERATIONS				
	TOTAL RE	VENUE FOR	R ALL	OPERATIONS				
SECTION J: SUBCONTRACTE	ED OPERATIONS	Check here if th	is secti	on does not apply				
·	ork subcontracted to oth		10 - 1			□ .		
	ndard Contract with your			-		∐ No		
Hold Harmless & Detailed Scope of Requirement that	Contract with your Sub-contract with your Sub-contract of Services Clause t you be named as an Addit you be granted a Waiver of	your Favor tional Insured on th	neir CGL	. policy	tors contain?			
4. Describe the Minimum Insurance Requirements of your Sub-consultants / Subcontractors / Independent Contra								
Commercial General L	•	Contractors Pollu		•	Professional Liability			
Yes No	of Workers Compensations				actors / Independent Cont	ractors?		

SECTION	v IX.	OFERATION	3/PROCEDURES						
1.			e or rent equipme the equipment:	nt to others?	Yes No				
		What percentage of rented equipment requires an operator?							
	What percentage of rented equipment does not require an operator?								
		What Co	ommercial Genera	l Liability limi	ts do you require from your clients who use this equipment:?				
		Are you	named as Addition	onal Insured o	n your client's Commercial General Liability policy? Yes No				
		Does yo	our client hold you	harmless and	d indemnify you for their use of this equipment? Yes No				
2.	Ple	ase list all stat	es where your pe	rform operation	ons:				
	-	-	-		do you conduct any operations in any of the 5 boroughs of New York City (Manhattan, Nor Nassau or Suffolk Counties? Yes No Is yes, what percent?				
OFOTIO			•	<u> </u>					
SECTION		CLAIMS	h	ualu (laat fina	was and a speciment the Appullicant or you arted any day any Commencial Company Highlites				
1.		•	been made previoution Liability or F	• •	years) against the Applicant or reported under any Commercial General liability, iability policies? Yes No				
	00	Total	Number of	Valuation	<i>;</i> , <u> </u>				
0		Incurred	Claims	Date	Include Loss & Expenses Paid & Reserved				
Current Year									
1 st Prior Year									
2 nd Prior									
Year 3 rd Prior									
Year 4 th Prior									
Year									
2.	2. Has any claim, suit or notice of incident been made against the firm or any staff member? Yes No If yes, please attach full details on each incident.								
3.		• • •	•	•	ich may result in any claim, suit or notice of incident against him, the firm, his				
			ousiness, any of t ch full details on		past partners or officers, or any staff member?				
	,								
FRAUD	NAR	NING: APPLIC	CABLE TO ALL ST	ATES					
					rance company or other person files an application for insurance or statement of claim				
containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.									
WARRANTY STATEMENT									
The undersigned authorized officer of the applicant declares that the statements set forth herein are true. The undersigned authorized officer agrees that if the information supplied on the application changes between the date of the application and the effective date of the insurance, he/she (undersigned) will									
immediately notify the insurer of such changes, and the insurer may withdraw or modify any outstanding quotations and/or authorization or agreement to bind the insurance. Signing of this application does not bind the applicant or the insurer to complete the insurance.									
NOTICE	то	APPLICANTS:							
a)	А	ny person who	knowingly and with	intent to defra	aud any insurance company or Other person files an application for insurance containing any				
•				e Purpose of r	misleading, information concerning fact material thereto, commits a fraudulent insurance Act,				
b)	which is a crime. b) You agree that if the information supplied in the Application changes between the date of this Application and the effective date of the proposed insurance, then you will immediately notify the Underwriters of such changes.								
Signature	e :				Date:				