

APPLICATION DATE	NEED BY DATE	PROPOSED EFFECTIVE DATE		

ROCKHILL INSURANCE COMPANY

CONTRACTORS & CONSULTANTS APPLICATION

SECTION A: APPLICANT INFORMATION								
APPLICANT								
MAILING ADDRESS		CITY		STATE	ZIP CO	DE		
PHYSICAL ADDRESS IF DII	FFERENT		CITY		STATE	ZIP CO	DE	
CONTACT NAME	LCON	TACT E-MAIL	CONTACT PHONE	# \WF	BSITE AD	DDECC		
CONTACT NAME	CON	TACT E-MAIL	CONTACT PHONE	# WE	BOILE AL	DUKE99		
COMPANY IS: Individual Corporation LLC Partnership Other (Specify)								
PROVIDE BRIEF DESCRIPT		<u> </u>	• <u> </u>					
SECTION B: PERSONNE								
SECTION B. PERSONNE	-							
1. Number of Officers	s/Directors		PLEASE ATTACH	I A STATEMEN	T OF QUA	LIFICATI	ONS/	
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.				
	the company eve s □ No If ye	r been the subject of disciplina s, please explain:	ry action by authoriti	es as a result of	f professi	onal or co	ontracting	
SECTION C: HISTORY OF		о, россо охрани						
1. Date Established	2. Does the app	olicant have Subsidiaries	A parent comp	any Other	related en	tities If y	es, 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?								
SECTION D: REQUESTED	COVERAGE	Renewal	Ne	w Business				
COVERAGES	MOLD	LIMITS		DEDUCTIBLE			ROPOSED RETRO	
CGL							N21110	
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								
COVERAGES	CARRIER	MOLD	LIMITS	DEDUCTIBLE	RE	TRO	PREMIUM	
CGL								
CPL Occurrence		☐ Yes ☐ No						
CPL Claims Made		☐ Yes ☐ No						
Professional Liability		☐ Yes ☐ No						
Other		☐ Yes ☐ No						
		•	TOTAL PREMIUM PA	CKAGE POLICY	· [

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 % SUBBE			OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS
Appliance Installation	REVENUE	TO 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				trial Hygiene Consulting			
Alternative Energy Consulting Wind			Indus	trial Hygienists			
Alternative Energy Consulting Other			Lead	Consulting			
Asbestos Consulting			Mold	Analytical Laboratories			
Environmental Analytical Laboratories			Mold	Consulting			
Environmental Assessments (Phase I Surveys)			Mold	Inspections			
Environmental Assessments (Phase II Surveys)			Mold 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		(C l	stra et a vallo de vers de vet C		□ .	
	ndard Contract with your			-		∐ No	
3. Does your Standard Contract with your Sub-consultants/Subcontractors/Independent Contractors contain? Hold Harmless & Indemnification Clause in your Favor Detailed Scope of Services Clause Requirement that you be named as an Additional Insured on their CGL policy Requirement that you be granted a Waiver of Subrogation on their CGL policy							
4. Describe the Minimum Insurance Requirements of your Sub-consultants / Subcontractors / Independent Contractors							
Commercial General L	•	Contractors Pollu		•	Professional Liability		
Yes No	of Workers Compensations				actors / Independent Cont	ractors?	

0_0	IX.	OI EILAHOIL	S/PROCEDURES				
1.			e or rent equipme he equipment:	nt to others?	Yes No		
	What percentage of rented equipment requires an operator?						
		What pe	rcentage of rented	d equipment <u>c</u>	does not require an operator?		
		What Co	ommercial Genera	Liability limi	ts do you require from your clients who use this equipment:?		
		Are you	named as Additio	nal Insured o	n your client's Commercial General Liability policy? Yes No		
		• Does yo	ur client hold you	harmless and	d indemnify you for their use of this equipment? Yes No		
2.	Plea	ase list all stat	es where your per	form 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?		
OF OTION		• .	,				
SECTION		CLAIMS		andra (In an Cara	construct the Applicant or reported and a result of the life.		
		•	oeen made previoi ution Liability or P		years) against the Applicant or reported under any Commercial General liability, iability policies? Yes No		
	COI	Total	Number of	Valuation	<i>;</i> , <u> </u>		
		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. 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. Is the applicant aware of any circumstances, which may result in any claim, suit or notice of incident against him, the firm, his predecessors in business, any of the present or past partners or officers, or any staff member? Yes No If yes, please attach full details on each incident.							
FRAUD WARNING: APPLICABLE TO ALL STATES							
Any person who knowingly and with intent to defraud any insurance 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 TO APPLICANTS:							
 Any person who knowingly and with intent to defraud any insurance company or Other person files an application for insurance containing any false information, or conceals for the Purpose of misleading, information concerning fact material thereto, commits a fraudulent insurance Act, 							
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	:				Date:		
Title:							