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## Roofer Questionnaire

(Complete in addition to Contractors GL Application)

Named Insured: \_\_\_\_\_  
 Name of Producer/Agency: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address of Agency: \_\_\_\_\_ Producer Number: \_\_\_\_\_

**ANSWER ALL QUESTIONS—IF THEY DO NOT APPLY, INDICATE “NOT APPLICABLE”**

- Years of experience in this type of work \_\_\_\_\_
- What percentage of your work is **residential** (homes, condominiums)? \_\_\_\_\_ %  
 What percentage of your work is **commercial** (office buildings, schools, retail establishments)? \_\_\_\_\_ %  
 What percentage of your work is **industrial** (plants, warehouses)? \_\_\_\_\_ %  
**Total = 100 %**

3.	Type of Roofing Operation	Residential	Commercial	Industrial	% of Total Operations
	What percentage of work is New Construction?				
	What percentage of work is Repair/Patching?				
	What percentage of work is Replacement?				
	<b>Total =</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

What percentage of work is on Pitched Roofs?				
What percentage of work is on Flat Roofs?				
<b>Total =</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

4.	Indicate type of work performed and percentage of the operation within Type of Roofing Operation		Residential	Commercial	Industrial	% of Total Operations
	Shingles/Shakes	Asphalt				
		Fiberglass				
		Wood				
		Concrete				
		Slate				
	Metal					
	Shingle Ply					
	Tile					
	Polyurethane Foam:	Sheet Form				
		Sprayed				
	Hot Tar and/or Asphalt/Built Up					
	Rubber/Elastomerics					
	Other (describe):					
	<b>Total =</b>		<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

5. Check work done other than roofing: ☐ Waterproofing ☐ Siding ☐ Carpentry ☐ Rain Gutters  
☐ Asbestos Removal ☐ Insulation ☐ Other (describe): \_\_\_\_\_
6. If hot tar, torch or other "hot process" is used, explain in detail the process and what safety precautions are used:  
 \_\_\_\_\_  
 \_\_\_\_\_
7. Do you do any snow removal on roofs? ..... ☐ Yes ☐ No
8. Do you use any spray method for applying roofing materials? ..... ☐ Yes ☐ No  
 If yes, are flammable liquids or catalysts used? ..... ☐ Yes ☐ No
9. Do you install any type of elastomer roof covering? ..... ☐ Yes ☐ No  
 If yes, does the elastomer installation require use of flammable liquid or open fire? ..... ☐ Yes ☐ No
10. Are all jobs inspected by a foreman or the contractor at completion before leaving job site? ..... ☐ Yes ☐ No
11. Do you subcontract any work to others? ..... ☐ Yes ☐ No  
 If yes, what percentage do you subcontract? \_\_\_\_\_%
12. Check the type of work subcontracted out: ☐ Waterproofing ☐ Siding ☐ Hot Tar ☐ Rain Gutters  
☐ Carpentry ☐ Insulation ☐ Other (describe): \_\_\_\_\_
13. What is the annual cost of the work subcontracted out? \$ \_\_\_\_\_ yearly
14. Are Certificates of Insurance (of equal limits) received on all subcontracted work? ..... ☐ Yes ☐ No  
 How long are Certificates of Insurance kept? ☐ Until job ends ☐ One year ☐ Two years  
☐ Three years ☐ More than three years? ☐ Never kept
15. Do you utilize "day laborers"? ..... ☐ Yes ☐ No  
 If yes, how many within a year? \_\_\_\_\_
16. List any roofing/builder associations in which you are a member: \_\_\_\_\_  
 \_\_\_\_\_
17. Indicate Receipts for the previous three years:  
 Year: \_\_\_\_\_ Receipts: \$ \_\_\_\_\_  
 Year: \_\_\_\_\_ Receipts: \$ \_\_\_\_\_  
 Year: \_\_\_\_\_ Receipts: \$ \_\_\_\_\_
18. Do you offer warranties? ..... ☐ Yes ☐ No  
 If yes, attach copies of warranty
19. What is the average height of buildings you work on? \_\_\_\_\_ stories
20. What is the tallest building you will work on? \_\_\_\_\_ stories
22. Do you perform any roofing on town homes and/or condominiums? ..... ☐ Yes ☐ No
23. Where do you dispose of trash/waste/scrap?: \_\_\_\_\_  
 \_\_\_\_\_
24. Is this disposal process environmentally safe? ..... ☐ Yes ☐ No
25. Have you ever used, sold, installed or worked with asbestos? ..... ☐ Yes ☐ No  
 If yes, explain: \_\_\_\_\_

26. What is the maximum number of homes roofed in any one development, in any one year? \_\_\_\_\_
27. Any LPG storage? ..... ☐ Yes ☐ No  
 If yes, how much?: \_\_\_\_\_  
 How is it stored? \_\_\_\_\_  
 What are the safety precautions? \_\_\_\_\_
28. List five largest jobs and types in the last three years:  
 1. \_\_\_\_\_  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_  
 5. \_\_\_\_\_
29. If this is a new venture and/or the applicant has had no prior coverage within the past 3 years, include 2-3 verifiable references. Provide the name of the company in which the applicant worked, including contact names and phone numbers.  
 \_\_\_\_\_  
 \_\_\_\_\_
30. List the type of owned equipment used on the job  
 \_\_\_\_\_  
 \_\_\_\_\_
31. List any equipment rented and check the frequency of such rental

Type of Equipment	How often do you rent this equipment?			
	Daily	Weekly	Monthly	Yearly
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## PUBLIC PROTECTION

32. Do you have a written safety program? ..... ☐ Yes ☐ No
33. How do you protect the general public from potential injury? Check all that apply:  
☐ Rope off work area ☐ Signs ☐ Cones ☐ Flashing lights ☐ Man always on the ground  
☐ No protection necessary ☐ Other (describe): \_\_\_\_\_
34. How are materials lifted to the roof? Check all that apply.  
☐ Ladder ☐ Hoist ☐ Pulley ☐ Crane ☐ Other (describe): \_\_\_\_\_
35. Are materials and equipment left overnight at job site? ..... ☐ Yes ☐ No
36. In what manner are openings in roof protected overnight? Check all that apply.  
☐ Tarp ☐ Waterproof plywood ☐ Never leave openings ☐ Other (describe): \_\_\_\_\_
37. What on-the-job precautions do you take when rained on?  
☐ Leave job immediately ☐ Seal openings ☐ Keep on working ☐ Never start job  
☐ Remarks (be specific): \_\_\_\_\_

### FRAUD STATEMENT

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE AFTER REASONABLE INQUIRY AND ARE MADE PART OF ALL APPLICABLE APPLICATIONS FOR INSURANCE.

Any person who, with the intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud and subject to fines and/or imprisonment. Any changes in your operation must be reported to your agent.

**I agree that any intentional concealment or misrepresentation of a material fact concerning this insurance of the subject thereof may void any policy issued. I HAVE READ AND UNDERSTAND THE FRAUD WARNINGS CONTAINED IN ALL APPLICATIONS.**

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Signature of Applicant

Title

Date

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Signature of Producing Agent

Date

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Agency Name, address & phone number