

## **CONTRACTORS & CONSULTANTS APPLICATION**

SECTION A: APPLICANT II	NFORMATION							
APPLICANT								
MAILING ADDRESS			CITY	Гет	TATE   ZIP CO	DE		
MAILING ADDITESS		OTT	31	AIL ZIF OO	DL			
PHYSICAL ADDRESS IF DIFFERENT			CITY	ST	TATE ZIP CO	DF		
PHYSICAL ADDRESS IF DIFFERENT			0.11	0.	2 00	52		
CONTACT NAME	CON	TACT E-MAIL	CONTACT PHONE	ACT PHONE #   WEBSITE ADDRESS				
COMPANY IS: Individual Corporation LLC Partnership Other (Specify)								
				ther (Specify)				
PROVIDE BRIEF DESCRIPT	TION OF APPLICA	NT'S OPERATIONS:						
SECTION B: PERSONNE	L							
1. Number of Officers	/Directors		PLEASE ATTACH	A STATEMENT O	F QUALIFICATI	ONS/		
2. Number of Other K	ey Personnel		RESUME FOR A	RESUME FOR ALL OFFICERS, DIRECTORS AND				
3. Total Number of Pe	ersonnel		KEY PERSONNE	L LISTED.				
4. Has any officer of t	the company ever	been the subject of discip			rofessional or c	ontracting		
activities?   Yes	-	s, please explain:						
1. Date Established	CTION C: HISTORY OF COMPANY							
1. Date Established	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 acq	uisitions, consoli	dations, dissolutions, mer	rgers in the last 5 years?	Yes N	lo If yes, explai	n:		
SECTION D: REQUESTED	COVERAGE	COVERAGE Renewal New Business						
COVERAGES	MOLD	LIMITS		DEDUCTIBLE		PROPOSED		
CGL	015			2120011211		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								
COVERAGES	CARRIER	MOLD	LIMITS	DEDUCTIBLE	RETRO	PREMIUM		
CGL								
CPL Occurrence		☐ Yes ☐ No						
CPL Claims Made		☐ Yes ☐ No						
Professional Liability		☐ Yes ☐ No						
Other	_	☐ Yes ☐ No						
TOTAL PREMIUM PACKAGE POLICY								

SECTION F: GR	OSS RECEIPT	S PA	ST THREE (3) FI	SCAL YEARS			
	FISCAL YE	EAR	RECEIPTS				
1 <sup>st</sup> prior year			;	any deductions.	<u>eipts</u> are the total of all rece Please list your estimated gı	oss receipts including	work
2 <sup>nd</sup> prior year					others for the <i>next 12 mont</i> described below under "Others of the contract of		ate category.
3 <sup>rd</sup> prior year							
SECTION G: EN	VIRONMENTA	L CONT	RACTING OPER	RATIONS	Check here if this sect	ion does not apply	
OPERAT	IONS	PRO	JECTED GROSS REVENUE	% SUBBED TO OTHERS	OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS
Abatement Contra Asbestos	acting -				PCB Contracting		
Abatement Contra Lead	acting -				Radon Mitigation		
Abatement Contra	acting -				Recycling - Hazardous Materials		
Air Duct Cleaning					Service Station Contracting		
Alternative Energy Solar	y Contracting				Sewage Waste Remediation		
Alternative Energy	y Contracting				Soil Remediation (Petroleum)		
Alternative Energy Other	y Contracting				Soil Remediation (Other)		
Bio Remediation	(Soil, Water)				Soil Removal		
Build Back/Restor	ration				Tank and Pipe Cleaning		
Debris Removal ( Materials)					Tank - AST Contracting		
Debris Removal ( Hazardous/Waste					Tank - UST Installation Contracting		
Drilling					Tank - UST Removal Contracting		
Emergency/Spill F Fire (No Build Ba	ck)				Trucking – Hazardous Materials		
Emergency/Spill F (Rolling Stock/Ve	ssel Spill)				Waste Contracting – Hazardous Materials		
Fire & Water Dam Restoration Work					Waste Contracting – Non- Hazardous Materials		
Fuel System Insta	allation				Waste Water Facility Operators		
Groundwater Ren	mediation				Water Extraction		
Illegal Drug Lab	Cleanup				Wetlands Restoration and Construction		
Indoor Air Quality	,				Other (Specify)		
Industrial Cleanin	g				Other (Specify )		
Lab Packing and Sampling					Other (Specify )		
Landfill Construct	ion				Other (Specify )		
Liner Installation					Other (Specify )		
Liquid Waste Mar and Treatment					Other (Specify )		
Medical/Infectious Waste/Crime Sce					TOTALS FOR		
Mobile Incinerator	r				ENVIRONMENTAL CONTRACTING		

Mold Prevention

OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS	OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS
Appliance Installation		13 023	Interior Demolition/by Hand		15 01/12/10
Boiler Inspections			(not more than 6 stories)  Janitorial Contents Cleaning		
and Installations Bridge or Elevated Highway			Machinery or Equipment –		
Construction – Concrete			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 O	CONSULTING OPERATIO	NS	Check here if this sect	tion does not apply	
OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS	OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS
Air Monitoring			Indoor Air Quality Consulting (IAQ)		
Alternative Energy Consulting Solar			Industrial Hygiene Consulting		
Alternative Energy Consulting Wind			Industrial 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 Post Remediation Sampling		
Environmental Assessments (Phase III Surveys)			Project Remediation Mold Design		
Environmental Audits			Project Supervision		
Environmental Expert Witness			Radon Testing		
Environmental Feasibility Studies			Regulatory & Compliance Consulting		
Environmental Impact Studies			Remediation Project Design/Consulting		
Environmental Litigation Support			Safety Training Providers		
Environmental Manual Preparation			UST Consulting & Testing		
Environmental Permitting/Compliance			Wetlands Delineations		
Environmental Remedial Investigation/Studies			Wetlands Project Design/Consulting		
Environmental Sampling			Wildlife Studies		
Geophysical Consulting			Other (Specify )		
Geotechnical Consulting			Other (Specify )		
Hazardous Material Consulting			Other (Specify )		
Health & Safety Consulting			Other (Specify )		
Hydro Geological Consulting			TOTALS FOR PROFESSIONAL OPERATIONS		
	TOTAL RE	VENUE FOI	R ALL OPERATIONS		
SECTION J: SUBCONTRACTE	-D OPERATIONS	Check here if the	nis section does not apply		
			IS Section does not appro-		
=	vork subcontracted to othe andard Contract with your		/Subcontractors/Independent Co	contractors? Yes	☐ No
			ontractors/Independent Contract		
Hold Harmless &	Indemnification Clause in				
	of Services Clause at you be named as an Addi	litional Insured on t	heir CGL policy		
	at you be granted a Waiver of				
4. Describe the Minimus	m Insurance Requiremen	nts of your Sub-co	onsultants / Subcontractors / Ind	Jependent Contractors	
Commercial General L	Liability	Contractors Pollu	ıtions Liability	Professional Liability	
5. Do you require proof ☐ Yes ☐ No	of Workers Compensation	on Coverage from	n all Sub-consultants / Subcontra	actors / Independent Cont	ractors?
	ct Certificates of Insurance	ce from all Subcor	ntractors? Yes No		

SECTION K: OPERATIONS/PROCEDURES								
<ul> <li>1. Do you loan, lease or rent equipment to others? Yes No</li> <li>If yes, describe the equipment:</li> <li>• What percentage of rented equipment requires an operator?</li> </ul>								
What percentage of rented equipment does not require an operator?								
What Commercial General Liability limits do you require from your clients who use this equipment:?								
Are you named as Additional Insured on your client's Commercial General Liability policy?  Yes  No								
Does your client hold you harmless and indemnify you for their use of this equipment?  Yes  No								
2. Please list all states where your perform operations: If you perform any operations in New York State, do you conduct any operations in any of the 5 boroughs of New York City (Manhattan,								
Brooklyn, Queens, Bronx and Staten Island) and/or Nassau or Suffolk Counties? Yes No Is yes, what percent?								
SECTION L: CLAIMS								
1. Have any claims been made previously (last five years) against the Applicant or reported under any Commercial General liability,								
Contractor's Pollution Liability or Professional Liability policies? Yes No								
Total Number of Valuation Incurred Claims Date Include Loss & Expenses Paid & Reserved								
Current Year								
1 <sup>st</sup> Prior Year								
2 <sup>nd</sup> Prior								
Year 3 <sup>rd</sup> Prior								
Year 4 <sup>th</sup> Prior								
Year								
<ol> <li>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.</li> <li>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.</li> </ol>								
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:								
a) 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,								
<ul> <li>which is a crime.</li> <li>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.</li> </ul>								
Signature: Date:								
Title:								