

**COLONY INSURANCE COMPANY - COLONY SPECIALTY INSURANCE COMPANY  
PELEUS INSURANCE COMPANY**
**CONTRACT DIVISION - CONTRACTORS - SUPPLEMENTAL APPLICATION**

(Complete in addition to Acord Application)

**I. APPLICANT**

Name \_\_\_\_\_

Address \_\_\_\_\_

**II. OPERATIONS** (Check or complete all that apply)

Describe Operations \_\_\_\_\_

Years in Business \_\_\_\_\_ Years Experience \_\_\_\_\_

States where work is anticipated during the policy term: \_\_\_\_\_

	% Operations		% Operations	
Artisan/Subcontractor	_____ %	Developer	_____ %	<input type="checkbox"/> E&O Coverage in place
Construction Project Manager*	_____ %	General Contractor	_____ %	
Consultant*	_____ %	Owner/Builder	_____ %	
			<b>Total of all Operations</b>	_____ % (must = 100%)

Type of Construction	% New Construction	% Remodeling	Total % of all Operations
Commercial/Industrial	_____ %	_____ %	_____ %
Residential	_____ %	_____ %	_____ %
Apartment	_____ %	_____ %	_____ %
Condominium/Townhome	_____ %	_____ %	_____ %
<b>Total</b>			_____ % (must = 100%)

☐ Real Estate Development Property Owned # Acres \_\_\_\_\_ Currently under development ☐ Yes ☐ No  
 Zoned: ☐ Habitational ☐ Retail ☐ Commercial/Industrial ☐ Other \_\_\_\_\_

☐ Vacant Land Owned # Acres \_\_\_\_\_  
 Zoned: ☐ Habitational ☐ Retail ☐ Commercial/Industrial ☐ Other \_\_\_\_\_

\*Project Managers and/or Consultants (classify as General Contractor if either is "Yes")

☐ Yes ☐ No Applicant is engaged in actual construction  
☐ Yes ☐ No Applicant hires or supervises subcontractors

Describe projects:

**III. LAST THREE LARGEST JOBS**

Start Date	End Date	Value	Cost	Description
		\$	\$	
		\$	\$	
		\$	\$	

**IV. LICENSING**

Number \_\_\_\_\_ Type \_\_\_\_\_ State \_\_\_\_\_ If licensed in more than one state, attach list.

 Year Issued \_\_\_\_\_ License Active? ☐ Yes ☐ No

**V. TRADES** (Complete all that apply)

Trade			Payroll	Sub Costs
AC/Heating/Combined AC/Heating				
Alarms/Alarm Systems				
Appliances & Accessories				
Carpentry	Interior			
	NOC			
	Shop Only			
Carpet/Rug/Upholstery Cleaning				
Communication Equipment				
Computer Service or Repair				
Contractors Equip - Rented Others - w/o Operator				
Debris Removal - Construction Site				
Door/Window Assembled Millwork - Metal				
Draftsmen				
Drywall or Wallboard Installation				
Electrical Apparatus - Install-Service-Repair				
Electrical Work - within Buildings				
Engineers or Architects - Consulting				
Excavation				
Executive Supervisor - Project Manager				
Fence Erection				
Fire Extinguishers - Servicing-Refilling-Testing				
Fire Suppression Systems - Install-Service-Repair				
Floor Covering Install - Not Ceramic/Tile/Stone				
Furniture/Fixtures - Install-Service-Repair				
Garbage/Ash/Refuse Collecting				
Grading of Land				
Greenhouse Erection				
Guniting or Shot-Crete				
Handyperson				
House Furnishings Installation				
Insulation Work	Mineral			
	Organic-Plastic - Solid State			
	Plastic			
Irrigation or Drainage System Const.				
Janitorial Service				
Landscape/Gardening/Lawn Care				
Machinery/Equipment - Install-Service-Repair				
Masonry				
Metal Erection/Installation				
Outside Surfaces Buildings & Other Exterior Surfaces	Cleaning			
	Renovating			

Trade		Payroll	Sub Costs
Painting	Exterior 3 stories or less		
	Exterior more than 3 stories		
	Interior		
	Shop only		
Paving	Driveway-Parking-Sidewalk		
	Street or Road		
Plastering or Stucco Work			
Plumbing	Commercial/Industrial		
	Residential		
Prefabricated Building Erection			
Roofing	Commercial		
	Residential		
Septic Tank	Cleaning		
	Install-Service-Repair		
Sheet Metal Work - Outside			
Siding Installation			
Sign Erection - Install-Repair-Painting-Lettering			
Snow & Ice Removal			
Solar Energy Contractors			
Street Cleaning			
Surveyors-Land - Not Engaged in Construction			
Swimming Pools	Install above ground		
	Install below ground		
	Service-Repair		
Telephone/Telegraph/Cable TV Line Const.			
Television/Radio Receiving Set - Install-Repair			
Tent/Canvas Goods - Erection-Removal-Repair			
Tile/Stone/Marble/Mosaic/Terrazzo - Interior			
Tree Pruning/Dusting/Spraying/Trimming			
Upholstering	Shop Only		
	On Customers Premises		
Water Softening Equip. - Install-Service-Repair			
Water-proofing	NOC		
	Pressure Apparatus		
	Trowel - Exterior		
	Trowel-Interior-Insulation work		
Window Cleaning			
Wrecking - Buildings or Structures			
Other			

**VI. CONTRACTS**

Written contracts are always used with customers prior to starting work

☐ Yes ☐ No**VII. GROSS SALES**

Anticipated \$ \_\_\_\_\_ Second Year Prior \$ \_\_\_\_\_  
First Year Prior \$ \_\_\_\_\_ Third Year Prior \$ \_\_\_\_\_

**VIII. SUBCONTRACTORS / EMPLOYEES**

Total Number of Employees \_\_\_\_\_

Total Number of Leased Employees \_\_\_\_\_

Is there any casual labor? ☐ Yes ☐ NoIf "Yes", are the same individuals generally used? ☐ Yes ☐ No

Total Percentage of subcontracted work performed by:

Insured Subcontractors \_\_\_\_\_ %

Uninsured Subcontractors \_\_\_\_\_ %

Total \_\_\_\_\_ % (must = 100%)

A.I.A. standards followed when establishing contracts with subcontractors

☐ Yes ☐ No

Additional Insured - Status granted to you on the subcontractor's policy

☐ Yes ☐ No

Hold Harmless and Indemnification Agreements

☐ Yes ☐ No

Same set(s) of subcontractors usually used

☐ Yes ☐ No

Limits of Liability - Subcontractors limits equal or above your own

☐ Yes ☐ No

Workers Compensation (if applicable) carried by subcontractor

☐ Yes ☐ No

Certificates of Insurance obtained prior to subcontracted jobs

☐ Yes ☐ NoCopies of contracts and  
certificates are retained for  
\_\_\_\_\_ years**IX. EXPOSURES****A. General Exposures** (Check or complete all that apply)**Above Grade Work** Maximum Height you will work \_\_\_\_\_ Feet**Below Grade Work** Maximum Depth you will work \_\_\_\_\_ Feet**Grade/Slope Work** Maximum % of Grade/Slope \_\_\_\_\_**Residential Work** ☐ Custom ☐ Tract # of Units any one Project/Development \_\_\_\_\_

Maximum # Stories \_\_\_\_\_ Maximum Square Footage \_\_\_\_\_

Maximum Dwelling Value \$ \_\_\_\_\_

☐ Architectural Plans or Blueprints are drawn up by the applicant☐ Home Warranty Program provided to purchasers (If "checked", attach copy of the program.)☐ Independent third-party inspections performed on all custom homes prior to release to purchaser☐ Model Home(s) operated by applicant Number of Homes \_\_\_\_\_**Commercial Work** Maximum Square Footage \_\_\_\_\_**B. Jobsite Exposures** (Check or complete all that apply)Scaffolding used ☐ Yes ☐ No☐ Non-employees permitted to use applicant's owned or rented scaffolding

Site Security

☐ Fencing ☐ Night Lighting ☐ Watchman ☐ Other \_\_\_\_\_

**C. Do you perform or subcontract any of the following types of work? (Check or complete all that apply)**

- |  |   |
|--|---|
| <input type="checkbox"/> Abatement or Environmental Work (asbestos, hazardous materials, lead, PCAB, mercury, mold etc.) | <input type="checkbox"/> Fire, Water and/or Disaster Restoration Work     |
| <input type="checkbox"/> Alarm Monitoring  | <input type="checkbox"/> Floor Waxing _____% of annual receipts           |
| <input type="checkbox"/> Blasting/Use of Explosives  | <input type="checkbox"/> LPG Work _____% of annual receipts               |
| <input type="checkbox"/> Backflow/Building Sprinkler   | <input type="checkbox"/> Mining - below surface level                     |
| <input type="checkbox"/> Caisson or Cofferdam  | <input type="checkbox"/> Moving of Buildings or Structures                |
| <input type="checkbox"/> Conversion of Structures to Condominiums  | <input type="checkbox"/> Overhead Rigging of Trusses or Lighting          |
| <input type="checkbox"/> Crane Operations Performed by Direct Employees  | <input type="checkbox"/> Pile Driving                                     |
| <input type="checkbox"/> Drilling of any sort  | <input type="checkbox"/> Pilings or Stilt Work                            |
| <input type="checkbox"/> Earthquake/Seismic Retrofitting   | <input type="checkbox"/> Shaft Sinking                                    |
| <input type="checkbox"/> EIFS  | <input type="checkbox"/> Sewer Mains or Connections Construction          |
| <input type="checkbox"/> Equipment Rental to Third Parties   | <input type="checkbox"/> Tunneling  |
| <input type="checkbox"/> Fenestration Services   | <input type="checkbox"/> Welding or Cutting - Welders Supplement required |

Details:

**D. Do you perform or subcontract work for any of the below location/customer types? (Check or complete all that apply)**

- ☐ Airports/Spaceports including hangar facilities located behind TSA controlled areas
- ☐ Assisted Living, Group Homes, Halfway Houses, Hospital, Nursing Homes, Rehab Facilities, Safe Houses, Social Services, Transitional Housing

Elaborate details of such work:

- |  |   |
|--|---|
| <input type="checkbox"/> Banks or Financial Institutions                         |   |
| <input type="checkbox"/> Alarm Installation                                      |   |
| <input type="checkbox"/> Bridges, Piers, Pilings, Stills or Wharves              | <input type="checkbox"/> Public Roadways                                      |
| <input type="checkbox"/> Chemical Plants and/or Storage                          | <input type="checkbox"/> Public Utilities                                     |
| <input type="checkbox"/> Correctional or Detention                               | <input type="checkbox"/> Railroad Facilities, including Street Car Facilities |
| <input type="checkbox"/> Governmental or Military                                | <input type="checkbox"/> Tribal Lands   |
| <input type="checkbox"/> Marine, Ocean Marine, Offshore (Oil Rigs, Cruise Ships) | <input type="checkbox"/> Other _____  |

Comments:

**E. Air Conditioning, Heating, Combined AC/Heating Refrigeration Systems (Check all that apply)**

- |   |   |
|---|---|
| <input type="checkbox"/> Boiler Installation, Service or Repair | <input type="checkbox"/> GeoThermal Heating/Cooling Systems Installation, Service or Repair |
|   | <input type="checkbox"/> Wood or Pellet Stove Installation, Service or Repair               |

**F. Carpentry - Drywall - Stucco - Woodworking (Check or complete all that apply)**

- |   |  |
|---|--|
| <input type="checkbox"/> Chinese Drywall                    | <input type="checkbox"/> Underpinning  |
| <input type="checkbox"/> Shoring Up of Buildings/Structures | <input type="checkbox"/> Wheelchair Ramp related work _____ % of annual receipts |
| <input type="checkbox"/> Structural Renovations             | <input type="checkbox"/> Wood or Pellet Stove Installation                       |
|   | <input type="checkbox"/> Wood Truss Fabrication/Manufacturing                    |

**G. Concrete - Paving - Gunite/Shot-Crete - Masonry - Waterproofing** (Check all that apply)

- ☐ Concrete Pumps: ☐ Exceeding 36 feet  
☐ Trailer-Mounted Systems that deliver concrete via boom assemblies  
☐ Skid Mounted and Rail Mounted Concrete Pumping
- ☐ Flood Vents ☐ Mudjacking (AKA slab jacking, concrete lifting, concrete raising, and slab leveling)  
☐ Foundation Repair/Renovation on Existing Structures ☐ Underpinning  
☐ Load Bearing or Structural Concrete Restoration Work

**H. Metal Erection** (Check all that apply)

- ☐ Ceiling or Wall Installation ☐ Outside Stairs or Railings ☐ Scaffolding  
☐ Decorative or Artistic ☐ Playground Equipment ☐ Shop Only  
☐ Fire Escapes ☐ Road/Highway/Freeway Guardrails ☐ Structural  
☐ Non-Structural

**I. Roofing** (Check or complete all that apply)

- ☐ Member of National Roofing Contractors Association (NRCA)

	New	Repair	Remodel	Re-Roof	Additions
Receipts	\$	\$			\$
	<b>Roofing Type</b>			<b>% Total Work</b>	
<input type="checkbox"/>	Asphalt Shingles			%	
<input type="checkbox"/>	Built Up Roof Systems -			%	
<input type="checkbox"/>	Tar and Gravel			%	Application: <input type="checkbox"/> Hot <input type="checkbox"/> Cold
<input type="checkbox"/>	Polymer-Modified Bitumen Sheet Membrane			%	Application: <input type="checkbox"/> Hot <input type="checkbox"/> Cold
<input type="checkbox"/>	Clay or Concrete Tile			%	
<input type="checkbox"/>	Green Roof Systems (i.e. Living Plant/Landscape based)			%	
<input type="checkbox"/>	Metal			%	
<input type="checkbox"/>	Slate			%	
<input type="checkbox"/>	Spray Polyurethane - Foam Based			%	
<input type="checkbox"/>	Thermo-Plastic Membranes			%	Application: <input type="checkbox"/> Hot <input type="checkbox"/> Cold
<input type="checkbox"/>	Wood Shakes/Shingles			%	<input type="checkbox"/> Treated <input type="checkbox"/> Untreated
	<b>Total</b>			%	(must = 100%)

Maximum Slope \_\_\_\_\_ Degrees

**Jobsite**

- Barriers used to keep public from entering jobsite or equipment area ☐ Yes ☐ No  
 Extinguishers (ABC type - 15 lbs. or larger) are present at all jobsites ☐ Yes ☐ No  
 Fire watch maintained at jobsite for at least 30 minutes after equipment shut off or removal ☐ Yes ☐ No  
 Inspection of all areas where heat work has been performed are completed prior to leaving jobsite ☐ Yes ☐ No  
 Kettles/heat process equipment during use are at ground level, away from building ☐ Yes ☐ No  
 Roof openings left overnight are protected from elements ☐ Yes ☐ No

**X. DISCONTINUED OPERATIONS / DISCONTINUED NAMED INSURED(S)** (Check or complete all that apply)

- ☐ Acted in the capacity of a General Contractor and/or Construction Project Manager on new-ground-up residential construction (defined as apartments, condos, co-ops, homes or townhomes) in past 10 years.
- ☐ Discontinued Operations for this application's Named Insured(s) in the past 10 years.

Provide details below:

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- ☐ Operated under a different 'Named Insured(s)' in the past 10 years. Indicate the Named Insured(s) and corresponding operations for the Named Insured(s) below:

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**XI. COVERAGE OPTIONS - LIABILITY** All options may not be available for your operations

- ☐ Employee Benefit Liability (Supplemental Application C-APP012 required)
- ☐ Employment Practices Liability Insurance (Not available in AR, LA, MT, NM, NY, VT)
- ☐ Cyber Suite
- ☐ Locksmiths - Property Damage Extension
- ☐ Overspray Coverage Limitation
- ☐ Professional Extension - Contractors Professional Liability Coverage Limitation
- ☐ Stop Gap Liability

**FRAUD STATEMENT**

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, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine.

**THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION**

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APPLICANT'S SIGNATURE

DATE