



Homebuilders Coverage Inc.TM Contractors' Renewal Questionnaire

Applicant/Business Name: _____ **FEIN#** _____
(If you have more than one entity to include as a Named Insured, complete page 4.)

Street/City/County: _____ **State:** _____ **Zip:** _____

Phone: _____ **Fax:** _____ **E-Mail:** _____ **D&B#:** _____

Type of Work Performed: **Homebuilder** **ModularBuilder** **Remodeler** **LandDeveloper** **Commercial**

1. # Starts/Jobs: Projected: _____
Last Year: _____

2. AVG Construction Cost: _____
(AVG CONSTRUCTION COST = Sales or Job Price less Profit, Land and Soft Cost)

3. Work Subcontracted (%) _____

4. Projected Sub Cost: _____
Sub Cost Last Year: _____

(SUB COST = materials & equipment you purchase for your subcontractors, plus labor, materials & equipment purchased by them. **Note:** for Modular Homes do not include manufacturer's cost nor costs paid by them for delivery or set-up.)

Note: The result of multiplying 1 x 2 x 3 should be within 90% of the answer(s) to # 4. If not, please review with your agent & attach explanation.

5. AVG Profit \$ _____

6. AVG Land Cost \$ _____

7. AVG Start/Job Duration: _____

8. Home/Job Cost Range: _____

9. Sales Price Range: _____

10. Gross Sales/Revenue: Projected this year _____ Last year: _____

11. # Employees _____ Payroll (excluding clerical) projected this year: _____ Last year: _____

12. Current & Future Planned work is: _____% Residential _____% Commercial = 100%
_____ % Single-Family (S-F) _____ % Multi-Family (M-F)* = 100%
_____ % Rural _____ % Urban _____ % Suburban = 100%

_____ % New subdivisions _____ % Existing subdivisions extensions _____ % Scattered site construction = 100%

*(M-F) = duplexes, tri-plexes, 4 plexes, etc., apartments, condominiums, OR attached single family row/townhomes

13. S-F & M-F - Complete the following for your current & future projects: (Attach separate listing if needed)

Project Name	Start/End Date	# 4-Plex	# 5-Plex	Total #	Total #
		or less	or more	M-F Units	S-F Homes
a. _____	_____	_____	_____	_____	_____
b. _____	_____	_____	_____	_____	_____
c. _____	_____	_____	_____	_____	_____
d. _____	_____	_____	_____	_____	_____

For each Project indicate the # of Home Designs & which had a Homeowners' (HO's) or Condo Association:

of **Different Home Designs** in each project above: **a** _____ **b** _____ **c** _____ **d** _____

Homeowners' Association: **a** Yes, No; **b** Yes, No; **c** Yes, No; **d** Yes, No

Condominium Association: **a** Yes, No; **b** Yes, No; **c** Yes, No; **d** Yes, No

14. Any current or future plans to work in other states? Yes, No. If yes, list them: _____

15. Modular Builder: List any new manufacturer's homes added since last year: _____

16. Commercial Work - Describe type & size of current/future work: _____

17. Land Developer: List any current or future planned project(s) where a related entity will **not** build any homes:

Project Name	Location	Start/End Dates
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18. Any current/future plans to build on hillsides, cliffs, landfills or other areas subject to subsidence? Yes, No
 If yes, list precautions taken? _____

19. Any current or future plans to use EIFS or any similar synthetic material? Yes, No.

20. How many job site Supervisors do you have? _____ How many are company Officers? _____

- a. How many Supervisors have completed OSHA 10 Hour Training: _____ 30 Hour Training: _____
- b. Do Supervisors document & check each stage of construction in a written format? Yes, No
- c. Do all job sites have full time Supervisors? Yes, No
- d. Do all Supervisors have at least 3 years trade experience? Yes, No
- e. Do you use a formal written Safety Program: Yes, No
- f. Do you conduct regular worksite safety inspections? Yes, No. Frequency? _____
- g. Do you use anyone, other than your Supervisors or Building Inspectors to perform documented quality control services during the construction process? Yes, No. If yes, describe: _____

21. Any current construction trade work done or future work planned, for other contractors? Yes, No. If yes, describe kind of work performed? _____

22. Describe type of work you directly perform: _____

23. Do you buy old homes, renovate and sell them? Yes, No

24. Do you perform fire or flood damage restoration work? Yes, No .

25. # acres of Vacant Land owned? _____ # acres of Land where work has started? _____

26. Do you perform any swimming pool construction? Yes, No. If yes, amount subcontracted: _____%

27. Do you or an employee perform professional services as an architect/engineer/draftsman? Yes, No. If yes, do you carry Professional Liability Insurance for this work? Yes, No. If yes, what limit: _____
 If no, does a licensed & insured architect/engineer/draftsman sign/stamp **all** new designs? Yes, No

28. Do you provide a warranty? Yes, No If yes, # years: _____ Is it insurance backed? Yes, No.
 If yes, what is the name of the Warranty Company: _____

29. Who is responsible for customer service? _____
 Are customer "walk through(s)" given? Yes, No If yes, how many: _____ Describe when conducted: _____

30. Do you provide a homeowner's manual with Equipment Warranties & Maintenance Schedules? Yes, No
 Home Maintenance Schedules and Responsibilities included? Yes, No
 Emergency Contact Names and Phone Numbers included? Yes, No

31. Insurance Certs required prior to start of work? Yes, No. GL Limits required? _____
 How do you monitor certificate expiration dates:
 Specially Designed Computer Software purchased from others; Self Designed Computer Program;
 Manual; Other, describe: _____

32. Subcontractor Contracts - **Attach a copy of your current contract signed by one of your subcontractors**
 a. Do you require all subcontractors to sign this contract? Yes, No If no, list any you don't: _____

b. If you build Modular Homes, **attach a copy of the contract for any new manufacturer you now build for.**

33. **Builders Risk Coverage.** Indicate the coverage options you would like included in quote:

a. **Limits:** Maximum Limit any one House: _____ Maximum Limit any one Loss: _____

Temporary Location Limit: _____ Transit Limit: _____

Reasonable Profit \$25,000 Soft Costs Coverage Furniture & Appliances

Model Homes: # Models: _____ AVG Construction Cost: _____ AVG Profit: _____

Model Contents: Average Contents: _____ AVG Months as Model: _____

Inventory Homes: # Homes: _____ AVG Construction Cost: _____ AVG Months in Inv: _____

Earthquake Coverage Earthquake Zone Required: _____ Limit: _____

Flood Coverage Flood Zone Required: _____ Limit: _____

b. **Deductible Desired:** \$1,000 \$2,500 \$5,000 Other: _____

c. **Fire Protection: Indicate which of the following apply to the areas where you build.**

Protection Classes(PC) if known: 1-5, 6-8, 9-10. Fire Depts: Paid, Volunteer

Distance to: Fire Dept: 5 miles or less, Over 5 miles,

Distance to: Fire Hydrant: 1000' or Less, Over 1000'

d. **Water:** (1) At what point in the construction phase is water brought in to activate new Fire Hydrants?

(2) Do you build near Coastal Waters? Yes, No. If yes, # miles from coast? _____

e. **Homes:** What is the maximum # completed homes (you still own) or under construction at one time that are separated by less than 150' _____ . What's the typical # of homes meeting these conditions? _____

f. **If Fire Hydrant is over 1,000' or Fire Dept is over 5 Miles Away:** Describe in detail the available private fire protection to ensure an adequate supply of water & the ability to get it to the fire:

g. **Site Security:** Describe in detail (e.g., fencing, lighting, security/patrol/guard service, etc.):

34. Are you, any partner, director or officer aware of any past accident, occurrence, fact, circumstance, or situation involving the business, which might result in a future claim? Yes, No. If yes, please provide details:

35. Please complete the information below for the insurance coverages you are requesting:

a. Property: what was your total building (RP) & contents (BPP) limit, last year: _____

b. Umbrella: what was your umbrella limit last year? _____ Did it include Auto? Yes, No

WARRANTY, AUTHORIZED SIGNATURE AND CONTINUING DUTY TO UPDATE

The undersigned is an authorized representative of the Applicant and acknowledges that the information provided above and with the application, including supplements, attachments, and replies to the underwriter inquiries, and applications from other insurance companies which have been submitted to Homebuilders Coverage, Inc. or its subsidiaries and made a part of the application:

1. Will be relied upon by Homebuilders Coverage Inc. in determining the acceptability of the prospective Name Insured and the premium to be charged;
2. Are true, accurate, and complete; and
3. Will be an integral part of any resultant contract.

The undersigned further agrees that the prospective Named Insured has a continuing duty, through date of policy inception, to update the application, including all supplements, attachments and replies to underwriter inquiries. Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance, or a claim containing any false or deceptive information, or conceals information concerning any fact material thereto, commits a fraudulent act, which may be a crime.

Applicant's Signature: _____

Date: _____

Multiple-Named Insured Supplemental Questionnaire (Copy as Needed)

Complete the following for each additional name/entity to be considered as a Named Insured

Named Insured: _____ Active, Inactive – year _____

1. Describe **ownership relationship** to first Named Insured: _____

2. Describe their operations: (homebuilder, remodeler, land developer, etc.): _____

Yrs in Bus: _____ States worked in: _____ If active are their subcosts included on the 1st page? Yes, No

3. If **Trade Contractor**, what type (i.e., carpenter, electrician, excavating, etc.)? _____

Ever worked as Trade Contractor for other contractors? Yes, No

4. If **Land Developer**, Over last 10 years, currently or future plans: Any land development projects where you (or a related business) didn't or won't construct homes in them? Yes, No. If yes, provide their **name(s) & completion date(s)**:

(1) _____ (2) _____

(3) _____ (4) _____

5. If **Homebuilder/Modular Builder**: Over the last 10 years & currently: List the name, start & completion date of your projects:

(1) _____ (2) _____

(3) _____ (4) _____

a. What's the total number of S-F homes/units in each project? (1) _____, (2) _____, (3) _____, (4) _____

b. How many of the total did/will you build in each project? (1) _____, (2) _____, (3) _____, (4) _____

c. If M-F homes, how many with 4 or less units per building: (1) _____, (2) _____, (3) _____, (4) _____

d. If M-F homes, how many with 5 or more units per building: (1) _____, (2) _____, (3) _____, (4) _____

d. Which had a Homeowners' Association: (1), (2), (3), (4). Condo Association: (1), (2), (3), (4).

e. List the # of **Different Home Designs** in each project: 1 _____, 2 _____, 3 _____, 4 _____

Named Insured: _____ Active, Inactive – year _____

1. Describe **ownership relationship** to first Named Insured: _____

2. Describe their operations: (homebuilder, remodeler, land developer, etc.): _____

Yrs in Bus: _____ States worked in: _____ If active, are their subcosts included on the 1st page? Yes, No

3. If **Trade Contractor**, what type (i.e., carpenter, electrician, excavating, etc.)? _____

Ever worked as Trade Contractor for other contractors? Yes, No

4. If **Land Developer**, Over last 10 years, currently or future plans: Any land development projects where you (or a related business) didn't or won't construct homes in them? Yes, No. If yes, provide their **name(s) & completion date(s)**:

(1) _____ (2) _____

(3) _____ (4) _____

5. If **Homebuilder/Modular Builder**: Over the last 10 years & currently: List the name, start & completion date of your projects:

(1) _____ (2) _____

(3) _____ (4) _____

e. What's the total number of S-F homes/units in each project? (1) _____, (2) _____, (3) _____, (4) _____

f. How many of the total did/will you build in each project? (1) _____, (2) _____, (3) _____, (4) _____

g. If M-F homes, how many with 4 or less units per building: (1) _____, (2) _____, (3) _____, (4) _____

h. If M-F homes, how many with 5 or more units per building: (1) _____, (2) _____, (3) _____, (4) _____

d. Which had a Homeowners' Association: (1), (2), (3), (4). Condo Association: (1), (2), (3), (4).

e. List the # of **Different Home Designs** in each project: 1 _____, 2 _____, 3 _____, 4 _____