

# Large Contractor Supplemental Questionnaire

**IMPORTANT NOTICE:** This questionnaire is an integral part of the application. Please ask for clarification if you do not understand a question. If a policy is issued, the answers in the questionnaire are considered warranties by you, in consideration for United Fire Group providing general liability insurance and workers compensation. Each answer is material to the decision of United Fire Group whether to provide the insurance. Your failure to provide a complete and accurate answer to any question may result in rescission of the entire policy, which means the **policy could be void from inception** and you may not be covered.

Named Insured \_\_\_\_\_

Social Security # \_\_\_\_\_ FEIN \_\_\_\_\_

Web Address: \_\_\_\_\_ Contractor License Number (if applicable) \_\_\_\_\_

## BUSINESS PROFILE

1. List all the states where you plan to work in the next year or have worked in the past:

\_\_\_\_\_

2. Does the applicant maintain job files .....  Yes  No      How long do they maintain them? \_\_\_\_\_ years

3. Provide the current year and an estimate for the next 12 months.

	Total Receipts	Subcontracted Costs	Office Employee Payroll*	Field Employee Payroll*	Number of Employees
Current Year	\$	\$	\$		#
Estimates	\$	\$	\$		#

\*exclude owner

4. List the largest jobs that you have completed within the last five (5) years. If you wish, you can attach a job list.

Description:	Sq. Ft.:	Yr Completed:	Value: \$
Description:	Sq. Ft.:	Yr Completed:	Value: \$
Description:	Sq. Ft.:	Yr Completed:	Value: \$
Description:	Sq. Ft.:	Yr Completed:	Value: \$
Description:	Sq. Ft.:	Yr Completed:	Value: \$

5. List the largest projects currently underway or planned for the next year.

Description:	Sq. Ft.:	Value: \$
Description:	Sq. Ft.:	Value: \$
Description:	Sq. Ft.:	Value: \$



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**WORK PERFORMED**

7. Indicate the percentage of work performed by applicant. Each column should total 100%

New Construction	%	Commercial	%	Inside Building	%	Roofing-New installation Commercial	%
Alterations/ Remodeling	%	Residential	%	Outside Building- less than 3 stories	%	Roofing-New installation Residential	%
Service/Repair	%	Industrial	%	Outside Building- more than 3 stories	%	Roofing-Repair/ Replacement Commercial	%
Maintenance	%	Institutional	%	Other-describe	%	Roofing-Repair/ Replacement Residential	%
Total	%		%		%		%

8. Has the applicant ever performed any of the following? Check the box  that applies.

	Past	Present	Future	Subcontracted	Please Explain
■ Airport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Asbestos Installation/Abatement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Asphalt Batch Plant Operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Acted as a general contractor or project manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Blasting with use of explosives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Boiler Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Bridges/Overpasses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Construction Management for fee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Caissons/Piers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Crane or Rigging Operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Dam/Levees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Demolition or Structural Alterations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Drywall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Finish Grading (Finish graders are responsible for grading lots after the home is built to facilitate drainage)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Installed Drywall manufactured outside United States or Canada	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
■ EIFS/Stucco	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Electrical Work Inside or Outside	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____



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Past Present Future Subcontracted

Please Explain

■ Electrical Work/high voltage over 480 volts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Elevator Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Excavation/grading of land	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Equipment Rental to Others with no operator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Equipment rented to other with operator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Fire/Burglar Alarm Installation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Fire Proofing or Suppression System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Fracking for Gas and Oil Fields	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Government buildings, Military bases, Munitions plants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Green Construction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Level of Certification	_____				
■ Hauling Goods of Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Heavy Machinery Installation/repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Hospitals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Insulation (foam)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Iron Works for security around windows, doors and railing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Irrigation/Flood Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Lead Abatement/Removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Masonry Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Mine Operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Mold , Fire, Water Damage Remediation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Mullti unit apartment, condo, townhouse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
	# of homes in any one tract _____				
■ New Home Construction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
# of homes per year _____	Average Value per home \$ _____				
■ Oil and Gas or Refinery Work or Drilling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Paper General Contractor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Pollution Clean-Up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____



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	Past	Present	Future	Subcontracted	Please Explain
■ Power Plants/Nuclear Facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Public Utilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Railroads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Real Estate Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Retaining Wall Over 4 Feet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Roofing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Seismic Retrofitting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Site Grading, excavation, trenching, shoring, tunneling, earth moving, pile driving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Soil Testing Compaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Slope and Hillside Work If yes, maximum grade? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Solar Panels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Street/Road/Bridge/Tunnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Swimming Pools or Ponds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Traffic Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Underground Cabling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Underground Tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Waterproofing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Water/Sewer/Gas Main	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Water/Fire Restoration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Wind Turbines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
■ Work over Three Stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

9. Has or will applicant complete projects needing a helicopter lift? ..... Yes  No

10. Has or will applicant complete projects needing a tandem crane lift? ..... Yes  No

11. Has or will applicant do work below ground level? ..... Yes  No

a. If yes, how deep \_\_\_\_\_ maximum depth in feet

b. What precautions are taken to prevent trench collapse?



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**EMPLOYEE SAFETY QUESTIONS**

- 12. Does applicant have a formal written safety and security program and policy that has been distributed and acknowledged by employees? .....  Yes  No
- If yes, does the applicant have the following:

  - a. New employee orientation .....  Yes  No
  - b. Toolbox safety talks .....  Yes  No
  - c. Accident investigation .....  Yes  No
  - d. Personal protection equipment supplied to all employees .....  Yes  No
  - e. Call before you dig procedures .....  Yes  No
  - f. Is cellular phone use and texting while driving prohibited? .....  Yes  No

- g. New hire drug and alcohol screening .....  Yes  No
- h. Random and post Accident drug and alcohol screening .....  Yes  No
- i. Criminal background checks on new hires ....  Yes  No
- j. Transitional/light duty work for injured workers .....  Yes  No
- k. A documented and enforced fall protection program .....  Yes  No
- 13. Has the applicant or any employees worked under US Longshoremen's and Harbor Workers Act or Jones Maritime Act? .....  Yes  No
- 14. Does applicant order and review MVRs of all new drivers? .....  Yes  No
- What action is taken for drivers that do not meet their standard? \_\_\_\_\_

**SUBCONTRACTING EXPOSURE QUESTIONS**

- 15. Does applicant require subcontractors to add applicant as an additional insured—including completed operations—to their policy? .....  Yes  No
- 16. Does applicant require written contracts or agreements with subcontractors? .....  Yes  No
- Written contracts or agreements attached.

  - a. Has your legal advisor reviewed and approved the agreement you use? .....  Yes  No
  - b. Do the contracts provide a hold harmless agreement in your favor? .....  Yes  No
  - c. Do the contracts provide a waiver of subrogation clause? .....  Yes  No

- d. Do the contracts stipulate that the subcontractor and the subcontractor employees are independent contractors and that the subcontractor is responsible for providing workers compensation? .....  Yes  No
- e. Do the contracts stipulate that subcontractors must carry limits equal to or greater than those of the applicant? .....  Yes  No
- f. Do the contracts stipulate that applicant will be given a copy of subcontractors safety agreement .....  Yes  No
- 17. Does applicant require certificates of all subcontractors on file? .....  Yes  No
- 18. Does applicant keep certificates of all subcontractors on file? .....  Yes  No
- How long are certificates maintained? \_\_\_\_\_ years



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**N.J. Law P.L. 1995, c. 132:** Any Person who includes any false or misleading information on the application for an insurance policy is subject to criminal and civil penalties. The information in this application is correct to the best of my knowledge and belief.

**For PA Submissions:**

Any person whoknowingly and with intent to defraud any insurance company or other person files an applciation 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 subjects such person to criminal and civil penalties. The information in this application is correct to the best of my knowledge and belief.

I certify that the information in or attached to this questionnaire is true, complete and correct based on business records and my personal knowledge. I understand that United Fire Group may rescind coverage if I have not provided accurate and complete information in this questionnaire. I grant United Fire Group authorization to order a credit report on my business and/or me.

Owner or Officer's Name	Agent's Name	
Title	Agent's Signature	Date
Owner or Officer's Signature	Date	Expiring UFG policy number, if applicable



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