

# Builders Risk Supplemental Application

Date: \_\_\_\_\_

Name and address of Insured:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name and address of producer:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Applicant is: ☐ Individual ☐ Partnership ☐ Corporation ☐ Joint Venture ☐ Other

Interest of applicant ☐ Owner ☐ Contractor ☐ Other: \_\_\_\_\_

Name and address of mortgagee:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Policy term: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Deductible: ☐ \$2,500 ☐ \$5,000 ☐ \$10,000 ☐ Other: \_\_\_\_\_

Location of project: \_\_\_\_\_

Description of project: \_\_\_\_\_

Is this a renovation? ☐ Yes ☐ No: \_\_\_\_\_

Describe structural work to be completed: \_\_\_\_\_

Contractor name and address: \_\_\_\_\_

Has contractor completed this type of project before? ☐ Yes ☐ No

How many years in business? \_\_\_\_\_

Inspection contact name and phone number: \_\_\_\_\_

## Limits of Insurance:

- |             |  |
|-------------|--|
| 1. \$ _____ | At the project site                        |
| 2. \$ _____ | In temporary storage at any other location |
| 3. \$ _____ | While in transit                           |
| 4. \$ _____ | Other                                      |
| 5. \$ _____ | For all covered property                   |

Flood limit requested: \$ \_\_\_\_\_ Deductible \_\_\_\_\_ Flood zone \_\_\_\_\_

Earthquake limit requested: \$ \_\_\_\_\_ Deductible \_\_\_\_\_

**Soft Costs** (Extra Expense and Rental Income) is Soft Cost Coverage desired? ☐ Yes ☐ No

If 'yes', provide the following information:

Extra Expense:

Annual of Full Dollar Amount

Construction Loan Interest

\$ \_\_\_\_\_

Real Estate and Property Taxes

\$ \_\_\_\_\_

Architect, Engineering and Consultant Fees

\$ \_\_\_\_\_

Builder's Risk Insurance Premium Charge	\$ _____
Advertising and Promotional Expenses	\$ _____
Other – describe _____	\$ _____
Rental Income – Total Rental Income Values	\$ _____
Total Extra Expense Value	

Limit of Insurance Requested for:

Extra Expense:	\$ _____
Rental Income:	\$ _____

**Construction:**

<input type="checkbox"/> Frame	<input type="checkbox"/> Joisted Masonry	<input type="checkbox"/> Non-Combustible
<input type="checkbox"/> Masonry Non-Combustible	<input type="checkbox"/> Modified Fire Resistive/Fire Resistive	

Completed Value: \$ \_\_\_\_\_

Total Square Footage: \_\_\_\_\_ Number of Floors: \_\_\_\_\_

Intended Occupancy when completed: \_\_\_\_\_

**Protection:**

Distance to operating fire hydrant: \_\_\_\_\_ Fire Department: ☐ Paid ☐ Volunteer

Will the project be equipped with working standpipes? ☐ Yes ☐ No

Public fire protection at the job site:

Will Temporary heating be used? ☐ Yes ☐ No

Will the project site be fenced? ☐ Yes ☐ No

Will the project site be locked? ☐ Yes ☐ No

Will the project site be lighted? ☐ Yes ☐ No

Will there be a watchman on premises during non-worker hours? ☐ Yes ☐ No

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_