

Send Applications to: New@NAESIP.com

GENERAL CONTRACTORS POLLUTION LIABILITY SUPPLEMENTAL APPLICATION

INSTRUCTIONS: Please complete all applicable sections of this Application. Please read all questions carefully and provide complete answers. Failure to provide complete information may result in delay in consideration of this Application. This Application is NOT an insurance policy and the Company affording coverage reserves the right to reject any application for any reason. If additional space is needed, attach details to Application on a separate sheet of paper. All Applicants must sign the Application where indicated.

NOTICE: For certain policies and coverage parts issued, the limit of liability available to pay judgments for settlements shall be reduced by amounts incurred for legal defense. Further note that amounts incurred for legal defense shall be applied against the deductible or retention amount.

ALL APPLICANTS MUST SUBMIT THE FOLLOWING INFORMATION IN ADDITION TO THE APPLICATION:

1. Statement of Qualifications (SOQ) to include resumes, brochures, and a listing of previous projects;
2. Five years of currently valued loss runs;
3. Most recent income statement and balance sheet.

APPLICANT INFORMATION

Applicant: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Company is an: Individual Partnership Corporation Joint Venture Other _____
(please describe)

DESIRED COVERAGE

1. New Business Renewal
2. Proposed Effective Date: _____ Proposed Retroactive Date: _____
3. Limits Of Liability/Deductible Requested: Limits: _____
Deductible: _____
4. Other Coverages by Endorsement(s): _____

OPERATIONS

1. Please list your estimated receipts **including subcontracted work** for the next 12 months next to the appropriate category. List services not described below under "Other" (please be specific):

General / Trade Contracting			
Concrete (Foundation)	\$	Landscaping	\$
Concrete (Other)	\$	Masonry	\$
Drilling (not oil/gas)	\$	Mechanical Construction	\$
Carpet/Upholstery Cleaning	\$	Metal Erection	\$
Carpentry	\$	Painting (Interior)	\$

General / Trade Contracting			
Construction (Residential)	\$	Painting (Exterior)	\$
Construction (Comm./Ind.)	\$	Pile Driving	\$
Debris Removal	\$	Plumbing	\$
Demolition (Interior)	\$	Refrigeration	\$
Demolition (Exterior)	\$	Roofing (Hot Tar)	\$
Drywall/Wallboard	\$	Roofing (All Other)	\$
Electrical	\$	Sewer Main Construction	\$
Excavation	\$	Soil Excavation – grading	\$
Fire / Water Restoration	\$	Street / Road Construction	\$
Grading of Land	\$	Tank & Pipe Cleaning	\$
HVAC	\$	Water Main Construction	\$
Industrial Maintenance	\$	Welding	\$
Insulation/Fire Proofing	\$	Wetlands Contracting	\$
Environmental Contracting			
Above Ground Storage Tank Installation	\$	Environmental Emergency Response	\$
Above Ground Storage Tank Removal	\$	Tank and/or Pipe Cleaning	\$
Underground Storage Tank Installation	\$	Abatement	\$
Underground Storage Tank Removal	\$	Asbestos	\$
Excavation of Contaminated Soils	\$	Lead Paint	\$
Environmental Drilling	\$	Mold	\$
Other – Contracting			
Describe:	\$	Describe:	\$
Describe:	\$	Describe:	\$
Describe:	\$	Describe:	\$
Describe:	\$	Describe:	\$
Total Projected Contracting Gross Receipts:		\$	

CLAIM INFORMATION (Please explain all “Yes” responses.)

1. Has any pollution-related claim, suit or notice of incident been made against the firm or any staff member? Yes No

If Yes, please provide full details on each: _____

2. 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 and/or has any claim, suit or notice of incident been made against the firm or any staff member? Yes No

If Yes, please provide full details on each incident: _____

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 to the insurer to complete the insurance.

NOTICE TO APPLICANTS

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing false, incomplete, or misleading information may be guilty of a felony or misdemeanor and subject to appropriate prosecution.

Applicant's Signature

Date

Print Name

Title