



Blackmoor General Insurance Agency
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ROOFERS SUPPLEMENTAL APPLICATION

APPLICANT INFORMATION

EFFECTIVE DATE: _____

1. NAME: _____
 STREET ADDRESS: _____
 CITY, STATE, ZIP: _____
 TELEPHONE: _____ WEBSITE: _____

TERM: _____ YEARS IN BUSINESS: _____ NEW VENTURE: YES NO

2. PERCENTAGE OF WORK IN EACH CATEGORY:

HOT COMPOSITION	_____ %	SHINGLES, TILES, SLATE	_____ %
METAL OR ALUMINUM	_____ %	POLYURETHANE	_____ %
TORCH DOWN	_____ %	SPRAYED (IF SO WHAT TYPE)	_____ %
OTHER	_____ %		

3. COMMERCIAL _____% RESIDENTIAL _____% INDUSTRIAL _____% INSTITUTIONAL _____%

4. HAVE YOU EVER BEEN INVOLVED IN THE INSTALLATION OR REMOVAL OF ASBESTOS OR ASBESTOS MATERIALS

YES NO IF YES, EXPLAIN: _____

5. DO YOU HAVE A WRITTEN SAFETY PROGRAM? YES NO IF YES, ATTACH A COPY

6. WHAT IS YOUR PROCEEDURE FOR INCLEMENT WEATHER? _____

7. DO YOU USE CASUAL LABORERS? YES NO

8. WHAT IS THE MAXIMUM BUILDING HEIGHT ON WHICH YOU WILL WORK? _____ AVERAGE _____

9. WHAT IS THE PERCENTAGE SUBCONTRACTORS USED? _____% WHAT IS YOUR ANNUAL COST? \$ _____

10. WHAT IS THE MINIMUM LIMITS OF LIABILTIY YOU REQUIRE FROM YOUR CONTRACTORS? \$ _____

11. DO YOUR SUBCONTRACTORS USE HOT TAR, TORCHDOWN, OR HEAT PROCESS? YES NO

12. HOW ARE MATERIALS LIFTED TO THE ROOF? _____

a. RENT A CRANE? YES NO WITH OPERATOR WITHOUT OPERATOR

b. # OF TIMES YEAR? _____ SIZE OF CRANE? _____ LENGTH OF BOOM & JIB _____

13. ARE ALL OPEN ROOF EXPOSURES PROTECTED PRIOR TO LEAVING THE JOBSITE? YES NO
14. ARE ALL JOBS INSPECTED BY MANAGEMENT AT COMPLETION BEFORE LEAVING THE JOB SITE? YES NO
15. HAS THE RISK/APPLICANT EVER BEEN INVOLVED IN THE NEW CONSTRUCTION OF TRACT HOUSING, ROW-HOUSES, CONDOMINIUMS, OR TOWN-HOUSES? YES NO IF YES, WHAT PERCENTAGE? _____%
16. DOES APPLICANT EVER USE CASUAL LABORERS? YES NO IF YES, WHAT PERCENTAGE _____%
17. DOES APPLICANT USE ANY TYPE OF SCAFFOLDING OR LIFTS? IF YES, DESCRIBE _____

18. DOES APPLICANT OFFER ANY WARRANTIES? IF SO, DESCRIBE TYPE AND LENGTH _____

19.

YEAR	CARRIER	LIMITS	PREMIUM	DATE OF LOSS	DESCRIPTION OF LOSS	AMOUNT INCURRED

20. APPLICANT SIGNATURE: _____ DATE: _____
21. PRODUCER NAME: _____
- ADDRESS: _____