

A. General Information  1. Insured Name: 2. Has any officer of the company declared for bankruptcy protection?	SUBCONTRACTOR DEFA	AULT INSURANCE REN	IEWAL AP	PLICATION				
1. Insured Name: 2. Has any officer of the company declared for bankruptcy protection?	A General Information							
2. Has any officer of the company declared for bankruptcy protection?  Ves No. If Yes, please explain:  3. Has any officer been convicted of a felony or any criminal conduct?  No. If Yes, please explain:  B. Broker Information  1. Name: 2. Primary Contact: Phone Number: Email: 3. Other Contact(s) Name: Phone Number: Email: C. Operations  1. Describe any changes in Operations over last 12 months: Sectors (e.g. Healthcare) / Geography (New office or project location) / New Scope (e.g. Now self performing work):  2. Total # of Employees: New Fiscal Year Revenue Next Fiscal Year Current Year Prior Fiscal Year A. Fiscal Year Listal Year End: S. Current Backlog: Estimated months to work through: 7. % of work Negotiated vs Lump sum: % Negotiated% Lump sum	A. General information							
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Year Revenue Subcontract Volume   Next Fiscal Year	2. Total # of Employees:	Home Office:	Field	: <u></u>				
Next Fiscal Year  Current Year  Prior Fiscal Year  4. Fiscal Year End:  5. Current Backlog:  6. Estimated months to work through:  7. % of work Negotiated vs Lump sum:% Negotiated% Lump sum		tract Volume:						
Current Year Prior Fiscal Year  4. Fiscal Year End: 5. Current Backlog: 6. Estimated months to work through: 7. % of work Negotiated vs Lump sum:% Negotiated% Lump sum		Revenue		Subcontract Volume				
Prior Fiscal Year  4. Fiscal Year End:  5. Current Backlog:  6. Estimated months to work through:  7. % of work Negotiated vs Lump sum:% Negotiated% Lump sum								
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6. Estimated months to work through:								
7. % of work Negotiated vs Lump sum:% Negotiated% Lump sum		through:						
			od 0/1	mn cum				
X PUBLIC AS PLIVATO. A PUBLIC A PLIVATO	=	·	:u70 LU	iiip suiii				

	State		%	Is	this	new fro	n prio	r policy?		
					Yes	No				
					Yes	No				
					Yes	No				
					Yes	No				
					Yes	No				
10	. Any New Ge	ographic Marl	kets Anticipated i	n next 3	Years	5?				
	State	Sta	te	State			Stat	e		
11	. Work by Ma	rket Segment:	:							
	% of Work	Market Seg	ment		%	of Wor	k	Market Segme	ent	
		General Cor	nmercial					Industrial		
		Education						Residential (Fo		
		Healthcare						Residential (N	ot For Sale)	
		Hospitality						Other:		
		Retail						Other:		
12	. Labor Type:	Union vs Non	Union:% Un	ion	% Noi	n union				
13	. Delivery Me	thod:% G0	C							
			√l @ Risk							
			√l Agent							
			esign Build							
		% Ot	her							
_										
D.	Project His	story								
			eing contemplate	d in the	upco	ming ye	ar:			
۲.	Construction		ear Completed	State		Mai	ket Se	gment		
	20			- 3446				0		
3.	# of Jobs Und	lerwav: Total	Number:	Typical F	Range	from (L	ow)	To (High)	. Average:	
			Months): From (							
			ed a job? Yes			10 (201)	o/	/werage.		
	-	-								
6.	Had your sure	ety complete a	project? Yes	∐No						
Ε.	Risk Mana	gement App	oroach							
1	% of subs nas	t 12 months	% Bonded	% Enro	olled i	n SDI				
	-						NI.			
۷.	70 OI Suppliers	hast 17 [[[0]]]	ths:% Bonde	u%	EIIIOI	ieu III SL	71			

9. Top 5 States You Work In:

Suh/Sunnlier	. 5 Largest Subcontracts Current Year: Sub/Supplier			Project Name			
Sub/Supplier		Contr	act Value	Project Name			
Avorago Siza Subcantract							
Average Size Subcontract:							
Total Estimated # of Active S							
Total Estimated # of Active S							
Estimated annual volume:							
. Subcontractor Default	History						
including Bond Claims:  Subcontractor/ Supplier	Trade	Contract Value	Loss Estimate	Reason for Default	Year Defaulted	Project Name	
	-						
Subcontractor Prequality	fication						
Subcontractor Prequality  Describe Changes and/or Up software):		equalification Pla	ın in past yea	ar (e.g. implemente	d 3 <sup>rd</sup> party pre-q	ualification	

F. Owners

J. Subcontractor Management	
Describe Changes and Updates to your Subcontractor Management	nent in past year:
2. Are any materials being direct purchased on behalf of subcontra	actors?YesNo. If yes, please list subcontractors:
K. Quality	
Describe Changes and Updates to your Quality plan in the past y	year:
N. Additional Information Required	
The Additional Information Required	
Sub Distribution – list of the previous 12 months of executed s Start/End date)	ubcontracts (Sub Name, FEIN, Contract Value, Project Name,
General Liability loss runs for previous 4 years (practice progra	ms and CIPs)
SDI loss runs for previous 5 years	
Named insured Listing	
Most Recent Fiscal Year Audited Financials	
Lending line – bank name and size  Name of Surety, surety line by job and aggregate	
WIPs – Current and most recent Y/E	
Variable and the state of the s	·
You represent that the statements and facts made in this application misstated. It is further agreed by you that each policy or renewal representations and information in the application.	
Signature	Date
Name	Title
Fraud Notice	
Arkansas: Any person who knowingly presents a false or	guilty of a crime and may be subject to fines and confinement

Subcontractor Default Insurance Application

fraudulent claim for payment of a loss or benefit or knowingly

presents false information in an application for insurance is

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in prison.

**Hudson Insurance Group** 

Colorado: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable for insurance proceeds shall be reported to the Colorado. Division of Insurance within the Department of Regulatory Agencies.

**District of Columbia**: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant

**Florida**: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Kansas: A "fraudulent insurance act" means an act committed by any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto.

**Kentucky**: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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.

**Louisiana**: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**Maine**: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or denial of insurance benefits.

**Maryland**: Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**New Jersey**: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**New Mexico**: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.

**New York**: General: All applications for commercial insurance, other than automobile insurance: 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. All applications for automobile insurance and all claim forms: Any person who knowingly makes or knowingly assists, abets, solicits or conspires with another to make a false report of the theft, destruction, damage or conversion of any motor vehicle to a law enforcement agency, the department of motor vehicles or an insurance company, 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 value of the subject motor vehicle or stated claim for each violation. Fire: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. The proposed insured affirms that the foregoing information is true and agrees that these applications shall constitute a part of any policy issued whether attached or not and that any willful concealment or misrepresentation of a material fact or circumstances shall be grounds to rescind the insurance policy.

**Ohio**: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

**Oklahoma**: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Pennsylvania: All Commercial Insurance, Except As Provided for Automobile Insurance: 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 subjects such person to criminal and civil penalties. Automobile Insurance: Any person who knowingly and with intent to injure or defraud any insurer files an application or claim containing any false, incomplete or misleading information shall, upon

conviction, be subject to imprisonment for up to seven years and the payment of a fine of up to \$15,000.

**Puerto Rico**: Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances [be] present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

**Rhode Island**: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**Tennessee:** All Commercial Insurance, Except As Provided for Workers' Compensation It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits. Workers' Compensation: It is a crime to knowingly provide false,

incomplete or misleading information to any party to a workers' compensation transaction for the purpose of committing fraud. Penalties include imprisonment, fines and denial of insurance benefits.

**Utah**: Workers' Compensation: Any person who knowingly presents false or fraudulent underwriting information, files or causes to be filed a false or fraudulent claim for disability compensation or medical benefits, or submits a false or fraudulent report or billing for health care fees or other professional services is guilty of a crime and may be subject to fines and confinement in state prison.

**Washington**: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

**West Virginia**: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**All Other States**: Any person who knowingly and willfully presents false information in an application for insurance may be guilty of insurance fraud and subject to fines and confinement in prison. (In Oregon, the aforementioned actions may constitute a fraudulent insurance act which may be a crime and may subject the person to penalties).

