

Hudson Insurance Group

Supplemental Application - Contractors

1. Named Insured: _____

2. Named Insured Mailing Address: _____
3. Is the applicant an Artisan or Trade Contractor _____ General Contractor _____ Construction Manager _____ or Subcontractor _____?
4. Years in business? _____ If less than 3 years # of years of management experience in the same field of construction? _____
5. Have you ever had your contracting license revoked or suspended? Yes _____ No _____ If yes, please explain in detail:

6. Receipts for the last twelve (12) months? _____ Next twelve (12) months? _____
7. What % of the total annual receipts is subcontracted? _____
8. Do you perform work in the states of Arizona, Colorado, Nevada, New York, Oregon or Washington?
Yes _____ No _____ If yes, please explain.

9. Describe the type of work done by the applicant and employees:

<u>Description of Work</u>	<u>%</u>	<u>New</u>	<u>Remodel</u>	<u>Total</u>
Residential	_____	_____	_____	100%
Commercial	_____	_____	_____	100%
Industrial	_____	_____	_____	100%
Total Work	100%			

10. List the last three jobs, including type of project and cost:

<u>Location</u>	<u>Description of Job</u>	<u>Job Receipts</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. Do you perform any work above 3 stories? Yes _____ No _____

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12. For roofing operations: is any hot tar, open flame or other heat processing involved? Yes ____ No ____

13. Are any of the following activities performed:

- Use of cranes? Yes ____ No ____
- Demolition or wrecking? Yes ____ No ____
- Blasting and/or use of explosives? Yes ____ No ____
- Sewer or septic work? Yes ____ No ____
- Excavation? Yes ____ No ____
- Pile driving? Yes ____ No ____
- Caisson or cofferdam work? Yes ____ No ____
- Shoring, underpinning or foundation work? Yes ____ No ____
- Snowplowing? Yes ____ No ____
- Any work on streets or roads? Yes ____ No ____
- Any pesticide, herbicide or fertilizer spraying? Yes ____ No ____
- Tree trimming? Yes ____ No ____
- Leasing of equipment to others...with or without operators? Yes ____ No ____
- Bridge or tower work? Yes ____ No ____

Explain any "Yes" answers above: _____

14. Describe security at your job sites; include any fencing with gates, watchmen, lighting, alarms, surveillance cameras, locks and any other protective equipment or method.

Named Insured Signature: _____

Date: _____

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FRAUD WARNINGS

To All Prospective Insureds: 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, for the purpose of misleading, conceals information concerning any fact material thereto, may commit a fraudulent insurance act which is a crime and subjects such person to criminal and civil penalties in many states.

To Prospective Insureds in:

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 claiming 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: "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."

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

New York: 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 \$5,000 and the stated value of the claim for each such violation.

New York (Fire insurance applications): 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.

New York (Automobile): 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 \$5,000 and the value of the subject motor vehicle or stated claim for each violation."

Pennsylvania (Automobile): 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 (7) years and the payment of a fine of up to \$15,000.