



CONSTRUCTION PROJECTS APPLICATION

Builder's Risk

"Wrap-Up" Liability

APPLICANT INFORMATION

1. Applicant's name:

2. Applicant's address:

PROJECT IDENTIFICATION

3. Name of Project: _____

4. New Construction (%) _____

Addition (%) _____

Renovation (%) _____

5. Description of work:

6. Location (address):

7. Occupancy:

8. Construction Period:

From _____

To _____

ADDITIONAL INSURED

Owner

General Contractor

Others

9. Name:

10. Address:

CONSTRUCTION

11. Number of storeys excluding basement: _____

12. Square ft/m per storey: _____

13. Building in construction

Structure

Concrete Steel Wood Other _____

Exterior walls

Concrete Concrete Brick veneer Other _____

Roof

Concrete slab Steel deck Other _____

Floors

Concrete Other _____

Interior walls

Masonry Gypsum Other _____

14. Existing Building:

Construction year: _____

Structure

Concrete Steel Wood Other _____

Exterior walls

Concrete Concrete Brick veneer Other _____

Roof

Concrete slab Steel deck Other _____

Floors

Concrete Other _____

Interior walls

Masonry Gypsum Other _____

15. Surrounding exposures

North _____

South _____

East _____

West _____

16. Fence location Yes No

17. Watchman service Yes No

18. Temporary heating Yes No
Type? _____

- | | | |
|---|------------------------------|-----------------------------|
| 19. Automatic sprinklers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is project within 500' of a Public Fire Hydrant | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Distance to fire department (KM) _____ | | |
| Excavation work | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| A geotechnical report has been prepared | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Construction according to report | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Underpinning work | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pile driving work | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Demolition work | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Blasting work | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Who will perform? _____ | | |
| Partial occupancy during construction | <input type="checkbox"/> Yes | <input type="checkbox"/> No |



COVERAGE BUILDER'S RISK

Coverages (Broad form)		Limits	Deductibles
Value of project (before taxes)			
Other Property to be Insured	Complete A below		
Flood & Earthquake	Complete B below		
TOTAL AT PROJECT SITE		Limits	Deductibles
Soft Costs			
Delayed Start-Up	Complete C below		
SUB LIMITS (included in total at project site)		Limits	Deductibles
Maximal value of property held at Offsite location			
Describe:			
Property in Transit under your responsibility			
Describe:			
Expediting Expenses			
Testing (days)	Complete D below		

A OTHER PROPERTY TO BE INSURED:

20. Existing Structure

\$ _____

Description:

21. Temporary buildings and their contents

\$ _____

Description:

22. Property owned by the Owner

\$ _____

Description:

23. Machinery and equipment other than forming part of the building

\$ _____

Description:

B FLOOD:

24. Name & Distance to a body of water:

C DELAYED START UP:

25. Provide type of incomes

26. Total limit of _____ per month

27. Number of months _____



D TESTING :

28. Describe equipment being tested:

29. Period _____

30. Testing on any used equipment? Yes No

WRAP-UP LIABILITY (COMPLETE ONLY IF THIS COVERAGE IS REQUIRED)

31. Completed Operations Period

- 12 months 24 months
- Other _____

	Limits of Liability:	Deductible
Option 1		
Option 2		

Does the project attached to or connected with an existing structure? Yes No

OTHER COVERAGES

- Pollution Professional Liability Marine

If Yes, please contact us for an application which must be completed.

DECLARATION AND SIGNATURE

It is understood and agreed that the completion of this application does not bind the insurer to sell, nor does it obligate the applicant to purchase the insurance.

Signature of the Insured: _____

Date: _____

Please send the completed, signed and dated application to underwriting@revau.com.