

**CONSTRUCTION RISKS APPLICATION**

**Single Project – Builders Risk & Wrap-Up Liability**

**GENERAL INFORMATION**

Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Have you ever had any prior losses (claimed or not) under a construction policy?  Yes  No

If YES, Please describe: \_\_\_\_\_

Have you ever had insurance refused or cancelled?  Yes  No

If YES, Please explain: \_\_\_\_\_

Mortgagee: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**PROJECT DESCRIPTION**

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Project Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

New Construction  Renovation / Addition

**\*\*If Renovation / Addition – Please complete RENOVATION / ADDITION PROJECTS SUPPLEMENTAL\*\***

Description of Project: \_\_\_\_\_

Number of separate structures: \_\_\_\_\_ Total square footage of the structures: \_\_\_\_\_

Number of units (inside each structure): \_\_\_\_\_ Number of stories: \_\_\_\_\_

If project consists of multiple structures, will project be built in phases?  Yes  No

If YES, please describe: \_\_\_\_\_

Is there Underground Parking?  YES  NO If YES, how many levels? \_\_\_\_\_

Construction Type:

Exterior Walls:  Wood  Non Combustible  Other, please explain: \_\_\_\_\_

Siding:  Wood  Brick  Vinyl  Other, please explain: \_\_\_\_\_

Floors:  Wood  Non Combustible  Other, please explain: \_\_\_\_\_

Roof:  Wood  Non Combustible  Tar & Gravel  Shake  Other, please explain: \_\_\_\_\_

Is there Hot Tar Roofing?  Yes  No

Is there Torch-On application?  Yes  No If YES, describe procedure: \_\_\_\_\_

Standard Construction Techniques:  Yes  No If NO, explain: \_\_\_\_\_

Will there be any occupancy prior to final completion?  Yes  No If YES, explain: \_\_\_\_\_

Describe any off-site operations or locations, which require insurance: \_\_\_\_\_

Please attach the following:

- Site Plan  Budget/Breakdown  Geotechnical Report  Construction Schedule

**PROTECTION**

Hydrant:  Yes  No Distance to fire hall: \_\_\_\_\_ km  Volunteer  Fully paid

Type of Neighborhood:  Residential  Commercial  Mixed  Other \_\_\_\_\_

Distance to closest occupied area in feet? \_\_\_\_\_ Is project viewable from road?  Yes  No

Private fire protections (Sprinklers/extinguishers, water tanks etc): \_\_\_\_\_

Site lighting: Is site well lit?  Yes  No Street only: \_\_\_\_\_ Additional lighting dusk to dawn:  Yes  No

Fencing 6 feet height:  Yes  No Monitored Alarm at lock up?  Yes  No

Is there a watchman/guard posted onsite during off-construction hours?  Yes  No

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**PROJECT MANAGEMENT**

Name of Owner: \_\_\_\_\_ Name of Project Manager: \_\_\_\_\_

Is project managed by a professional general contractor?  Yes  No

If NO, please explain who is managing, and list related prior experience (prior jobs):

\_\_\_\_\_

If YES, Name of General Contractor: \_\_\_\_\_ Years in Bus: \_\_\_\_\_

Does General Contractor carry CGL?  Yes  No If No, Please explain: \_\_\_\_\_

Loss History?  Yes  No If Yes, Please describe: \_\_\_\_\_

List of five prior similar projects:

NAME	TYPE	LOCATION	VALUE	DATE COMPLETED

Will the project be in compliance with all geo-technical report recommendations:  Yes  No

If NO, please explain: \_\_\_\_\_

\_\_\_\_\_

**COVERAGE**

Rebuild Costs: \$ \_\_\_\_\_ (Cost to Rebuild: Labour and Materials)

Soft Cost: \$ \_\_\_\_\_ (Optional by endorsement – eg. Interest, Legal, Accounting, Other Carrying Cost)

Delayed Opening: \$ \_\_\_\_\_ Limit per month: \$ \_\_\_\_\_ Time Period: \_\_\_\_\_ months

T.I.V. / Limit: \$ \_\_\_\_\_

If Flood is required - Distance from nearest body of water: \_\_\_\_\_ Height above body of water: \_\_\_\_\_

**PLEASE READ**

**Only complete the following if WRAP-UP LIABILITY is required**

Total Estimated Project Value: \$ \_\_\_\_\_ (Attach breakdown if available)

Limits of Liability Options:  \$5M  \$10M  \$15  \$20M  \$25M

Does the project attach to or communicate with an existing structure:  Yes  No

Manner in which structures will connect or communicate: \_\_\_\_\_

Will there be any occupancy prior to final completion?  Yes  No If YES, explain: \_\_\_\_\_

Detail the exposures to the property resulting from demolition, blasting, pile driving, shoring, and underpinning:

\_\_\_\_\_

Detail exposures to utilities, including relocation thereof (both below and above grade):

\_\_\_\_\_

Is there any shoring, underpinning, pile driving?  Yes  No

If YES, provide detail & costs: \_\_\_\_\_

\_\_\_\_\_

**ADJACENT STRUCTIONS (site plan if available)**

	TYPE OF CONSTRUCTION	OCCUPANCY	DISTANCE (FEET)
North			
East			

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South			
West			

Describe any offsite operations or locations, which require insurance:

\_\_\_\_\_

\_\_\_\_\_

Provide details of LOSS CONTROL PROGRAM to be implemented to protect others from operations (i.e. traffic control, reconstruction surveys, vibration monitoring preconstruction location of utilities and notification to others of interrupting thereof, etc):

\_\_\_\_\_

\_\_\_\_\_

Have you (owner, general contractor, project/construction manager) had any prior incidences (claimed or not) under a construction liability policy in the last five years?  Yes  No

If YES, explain (Date, Amount, Description): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE READ**

**Only complete the following if construction activity has already started on site**

What date did framing for the foundations start? \_\_\_\_\_

Why was insurance not placed at the time construction started?

\_\_\_\_\_

\_\_\_\_\_

Have there been any incidences on the site that could result in a loss?  Yes  No

If YES, explain: \_\_\_\_\_

Are there any builder liens or writs on this property?  Yes  No

If YES, explain: \_\_\_\_\_

Any changes in the financial status of the contractor or site owner?  Yes  No

If YES, explain: \_\_\_\_\_

Percentage of construction budget spent as at today? \_\_\_\_\_ %

Describe remaining work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE READ BEFORE SIGNING:** A claim will become invalid and the Insured's right of recovery is forfeited where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the insured fails to inform material changes to these facts during the term of the contract; (c) the insured contravenes a term of the contract or commits a fraud; or (d) the insured willfully makes a false statement in respect of a claim.

The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information.

The personal information provided in this document and in the future including, but not limited to, credit information and claims history may be collected, used and disclosed by the insured's representative or insurance company, subject to local legislation, for the purpose of communicating with the insured or their representative, assessing the application for insurance and underwriting any such policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.

**NOTE: Insurance is not in effect until Premier has issued a binder or policy documents.**

Applicant's Name: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Brokerage: \_\_\_\_\_ Broker Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Tel No: \_\_\_\_\_

*Premier Canada Assurance Managers Ltd. is one of Canada's largest Managing Underwriting Agents. The underwriting insurance carrier varies by line of business and region - please refer to specific quote for declaration of the underwriting insurance company(s).*

**\*\* Email application and attachments to - [newbizconstruction@premiergroup.ca](mailto:newbizconstruction@premiergroup.ca) \*\***

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