

**+ Wrap-Up  
Liability  
Application**

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## Wrap-Up Liability Application

Providing detailed information and submission of all documents / plans will increase our efficiency and ability to obtain the most favorable terms. When available, please provide:

- (a) **BREAKDOWN OF VALUES** for the various structures and types of work;
- (b) **SITE PLAN** indicating distance, construction and occupancy of exposures;
- (c) **SCHEDULE OF CONSTRUCTION**;
- (d) **GEOTECHNICAL REPORT**;
- (e) Schedule indicating **BUILD-UP OF CONSTRUCTION VALUES**.

### GENERAL INFORMATION:

Broker: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Applicant(s) – including all subsidiaries: \_\_\_\_\_

Is the Applicant(s) new to the broker:  No  Yes    If no, how long have you known the Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

### Project Participants (Names):

Owner: \_\_\_\_\_

Project / Construction Manager: \_\_\_\_\_

General Contractor: \_\_\_\_\_

Architectural / Engineering Consultant: \_\_\_\_\_

Geotechnical Engineer: \_\_\_\_\_

### PROJECTION INFORMATION:

Projection Duration: \_\_\_\_\_ Months    From: \_\_\_\_\_ To: \_\_\_\_\_

Policy Term (if different from above): \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address / Location of Project: \_\_\_\_\_ Postal Code: \_\_\_\_\_

No. of Stories (Above Grade): \_\_\_\_\_ No. of Stories (Below Grade): \_\_\_\_\_ Total Area (Sqft): \_\_\_\_\_

New Construction?  No  Yes    Renovation?  No  Yes    If yes, please provide a complete description

of the renovation work, including the cost of the renovations and value of the existing structure: \_\_\_\_\_

Is there more than one building?  No  Yes    If yes, please provide the value of each structure and distance between each one. \_\_\_\_\_

Site Plan attached?  No  Yes

**GENERAL CONTRACTOR INFORMATION:**

Is the General Contractor bonded?  No  Yes      Do they have CGL Insurance Coverage?  No  Yes

Very Experienced (10+ years)       Experienced (5-10 years)       Limited Experience (3-5 years)       Unknown

List the Project / Construction Manager's largest projects in the past 5 years (including Name / Type / Location / Value):

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**CONSTRUCTION INFORMATION:**

Construction Materials:      Roof Structure:

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Roof Covering:

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Any hot tar roofing?  No  Yes      Any Torch-On?       No  Yes

**SITE PREPARATION:**

Is there any pile driving, demolition, underpinning or shoring work?  No  Yes      If yes, please provide description and value of work:

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Is there any blasting work?  No  Yes      Anticipated Value of work:      Pre-blast survey?  No  Yes

Is there any potential exposure to adjacent structures from excavating?  No  Yes      If yes, please explain:

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**SURROUNDINGS:**

Adjacent Structures (attach site plan if available):

	TYPE OF CONSTRUCTION	OCCUPANCY	DISTANCE (FEET)
North			
South			
East			
West			

Are there any construction projects within 250' of this project?  No  Yes      If yes, please provide details:

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### SITE PROTECTION INFORMATION:

Is the site fenced?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Height / Type:
Watchman services?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Hours / Rounds:
Monitored Alarm at lock up?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Alarm sounds to:
Video surveillance?	<input type="checkbox"/> No <input type="checkbox"/> Yes	Type:
Site Lighting?	<input type="checkbox"/> No <input type="checkbox"/> Yes	

### GEOTECHNICAL DATA:

Has a geotechnical report been completed?  No  Yes      If no, please advise reasons:

Will the project be constructed in compliance with the geotechnical recommendations?  No  Yes  With Modifications

If with modifications, please describe:

If a copy of the geotechnical report summary and recommendations is not available, please describe soil conditions:

Type of foundation for each structure:      Are wood forms to be used?  No  Yes

Describe any unusual or experimental features in construction or design:

### COVERAGE REQUIREMENTS:

Total Estimated Project Value:      \$      (Please provide split of hard cost vs soft costs)

Completed Operations Period:       12 months       24 months       Other:

Wrap-Up Liability Limit (option 1)      \$      Deductible: \$

Wrap-Up Liability Limit (option 2)      \$      Deductible: \$

### MISCELLANEOUS INFORMATION:

Will there be a phased handover?  No  Yes

Does the project attach to or communicate with an existing structure?  No  Yes      If yes, please provide details:

Is damage to the existing structure required?  No  Yes

What is the value of the existing structure and what is its occupancy?

What operations & income are likely to be affected in the existing structure is damaged?

**MISCELLANEOUS INFORMATION** *(continued from previous page):*

If any part of the project will be occupied prior to the completion of the project, please provide details:

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**CLAIMS INFORMATION - LIABILITY**

Describe any insured and uninsured losses having occurred in the past 5 years by either the Owner, General Contractor, Construction Manager or Project Manager (please provide a description, date and amount of loss):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**DECLARATION AND SIGNATURE**

Consumer and previous insurer reports containing personal, credit, factual or investigative information about the applicant may be sought in connection with this application for insurance or a renewal, extension, or variation of the insurance applied for.

I / we declare that after proper enquiry the statements and particulars given above are true and that I /we have not misstated or suppressed any material fact.

I / we agree that this Application Form, together with any other material information supplied by me / us shall form the basis of any contract of insurance effected thereon.

I / we undertake to inform underwriters of any material alteration to these facts occurring before the completion of the contract.

Signed: \_\_\_\_\_ Full Name: \_\_\_\_\_

Position: \_\_\_\_\_ Date: \_\_\_\_\_