Chesterfield Canada, Inc.
Wholesale Insurance Brokers

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CONTRACTORS APPLICATION

1. Name of Applicant:

2. Address:

3. a) Description of Applicant's Operation:

3. b) _____ General Contractor _____ Sub-Contractor _____ Independent
c) _____ Individual _____ Partnership _____ Corporation

4. Breakdown of Applicant's Revenue:

Construction Trade	Revenue	Cost of Sub-let Work

5. Projected Revenue for next 12 months: $

6. Revenue for the past 3 years:
20___ to 20___ $
20___ to 20___ $
20___ to 20___ $

7. Number of years in business:

8. How many years experience in the type of operations undertaken do the Applicant and key employees have?

9. What percentage of operation is:
Residential Work _____% Commercial Work _____% Urban _____% Rural _____%

10. Do any operations take place outside of Canada? (_____) YES (_____) NO
If YES, describe:

11. Is equipment ever rented or leased to others? (_____) YES (_____) NO
If YES, what equipment?
If YES, please specify: (_____) With Operators (_____) Without Operators

12. Does the Applicant lease any motor vehicles or equipment? (_____) YES (_____) NO

13. Does the Applicant lease or maintain his own garage facilities? (_____) YES (_____) NO

14. Are sub-contractors required to carry liability insurance? (_____) YES (_____) NO

15. Are Certificates of Insurance always obtained from sub-contractors? (_____) YES (_____) NO

16. Are formal contractual agreements entered into with sub-contractors? (_____) YES (_____) NO
If YES, is a "Hold Harmless" clause included in Applicant's favour? (_____) YES (_____) NO

17. Is any work carried out at any oil or natural gas production, exploration or processing facility?
(_____) YES (_____) NO
Please provide details:

18. Is any gas line work done? (_____) YES (_____) NO
Please explain:

19. Are gas hook-ups from the meter in only? (_____) YES (_____) NO

20. Is any work carried out in Airports? (_____) YES (_____) NO
If YES, give complete details:

21. Has any work or operation been discontinued during past 5 years? (_____) YES (_____) NO

22. Please list and describe four (4) of the largest contracts, of recent date:
1. _____
2. _____
3. _____
4. _____

23. Do completed or planned projects include any of the following?

Blasting:	(_____) YES	(_____) NO		Rigging:	(_____) YES (_____) NO
Bridges:	(_____) YES	(_____) NO		Shoring:	(_____) YES (_____) NO
Caissons:	(_____) YES	(_____) NO		Structural Steel:	(_____) YES (_____) NO
Dams:	(_____) YES	(_____) NO		Tunneling:	(_____) YES (_____) NO
Excavating:	(_____) YES	(_____) NO		Underpinning:	(_____) YES (_____) NO
Land Clearing:	(_____) YES	(_____) NO		Use of Explosives:	(_____) YES (_____) NO
Oilfield Work:	(_____) YES	(_____) NO		Welding:	(_____) YES (_____) NO
Pile Driving:	(_____) YES	(_____) NO		Wrecking:	(_____) YES (_____) NO
Raising or Moving of Building:	(_____) YES	(_____) NO			(_____) YES (_____) NO

24. Are all employees (including contract employees) covered by Worker's Compensation?
(_____) YES (_____) NO
If NO, provide: Number of Employees _____ , Payroll _____ , Occupation _____

25. Limit of Insurance: $

26. Previous Insurer:
Previous Insurer:
Policy Number:

27. List all claims paid and/or outstanding during the past 5 years. Show all amounts "net" of deductible:

Date	Amount Paid	Amount Outstanding	Deductible	Description

28. Has any insurer ever cancelled or refused similar insurance for applicant? (_____) YES (_____) NO

Signature of Applicant	Position	Date

Agent/Broker _____