**ROOFERS QUESTIONNAIRE**

(COMPLETE IN ADDITION TO GL APPLICATION)

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| --- | --- |
| Applicant’s Name:       Mailing Address:             Location Address:             Website Address:        | Agency Name:       Agent No.:       Address:              E-mail:       Phone No.:        |

**PROPOSED EFFECTIVE DATE: From**       **To**       **12:01 A.M., Standard Time at the address of the Applicant**

ANSWER ALL QUESTIONS—IF THEY DO NOT APPLY, INDICATE “NOT APPLICABLE” (N/A)

**1. What percentage of your work is residential** (homes, condominiums)?      %

**What percentage of your work is commercial** (office buildings, schools, retail establishments)?      %

**What percentage of your work is industrial** (plants, warehouses)?      %

 **TOTAL:** 100%

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2.** | **Type of Roofing Operation** | **Residential** | **Commercial** | **Industrial** | **Percentage of Total Operations** |
| What percentage of work is New Construction? |    % |    % |    % |    % |
| What percentage of work is Repair/Patching? |    % |    % |    % |    % |
| What percentage of work is Replacement? |    % |    % |    % |    % |
| Total: | 100% | 100% | 100% | 100% |
| What percentage of work is on Pitched Roofs? |    % |    % |    % |    % |
| What percentage of work is on Flat Roofs? |    % |    % |    % |    % |
| Total: | 100% | 100% | 100% | 100% |

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| --- | --- | --- | --- | --- | --- |
|  | **Indicate type of work performed and percentage of operations within Type of Roofing Operation** | **Residential** | **Commercial** | **Industrial** | **Percentage of Total Operations** |
| Shingles/Shakes: | Asphalt |    % |    % |    % |    % |
|  | Fiberglass |    % |    % |    % |    % |
|  | Wood |    % |    % |    % |    % |
|  | Concrete |    % |    % |    % |    % |
|  | Slate |    % |    % |    % |    % |
| Metal |    % |    % |    % |    % |
| Shingle Ply |    % |    % |    % |    % |
| Tile |    % |    % |    % |    % |
| Polyurethane Foam: | Sheet Form |    % |    % |    % |    % |
|  | Sprayed |    % |    % |    % |    % |
| Hot Tar and/or Asphalt/Built up |    % |    % |    % |    % |
| Rubber/Elastomerics |    % |    % |    % |    % |
| Other (describe):       |    % |    % |    % |    % |
| Total: | 100% | 100% | 100% | 100% |

**3. Check work done other than roofing:** [ ]  Waterproofing [ ]  Siding [ ]  Asbestos removal [ ]  Rain gutters

[ ]  Carpentry [ ]  Insulation [ ]  Other (describe):

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| --- |
| **4. If hot tar, torch or other “hot process” is used, explain in detail the process and what safety precautions are used:**       |

**5. Do you subcontract any work?** [ ]  Yes [ ]  No

If yes, what percentage do you subcontract?      %

**6. Check the type of work subcontracted out:** [ ]  Waterproofing [ ]  Siding [ ]  Hot tar [ ]  Rain gutters

[ ]  Carpentry [ ]  Insulation [ ]  Other (describe):

**7. What is the annual cost of the work subcontracted out?** $      yearly

**8. Are Certificates of Insurance (of equal limits) received on all subcontracted work?** [ ]  Yes [ ]  No

**9. How long are Certificates of Insurance kept?** [ ]  Until job ends [ ]  One year [ ]  Two years [ ]  Three years

[ ]  More than three years [ ]  Never kept

**10. Do you utilize “day laborers”?** [ ]  Yes [ ]  No

If yes, how many within a year?

**GENERAL INFORMATION**

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| --- |
| **11. List any roofing/builder associations in which you are a member:**       |

**12. Receipts, Payroll and Number of Employees for previous three years:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Year** | **Receipts** | **Payroll** | **No. of Full-Time Employees** | **No. of Part-Time Employees** |
|      | $      | $      |       |       |
|      | $      | $      |       |       |
|      | $      | $      |       |       |

**13. Do you offer warranties?** [ ]  Yes [ ]  No

If yes, attach copies of warranty.

**14. What is the average height of buildings you work on?**       stories

**15. What is the tallest building you will work on?**       stories

|  |
| --- |
| **16. Where do you dispose of trash/waste/scraps?**       |

**17. Is this disposal process environmentally safe?** [ ]  Yes [ ]  No

**18. Have you ever used, sold, installed or worked with asbestos?** [ ]  Yes [ ]  No

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| --- |
| If yes, explain:       |

**19. Any LPG storage?** [ ]  Yes [ ]  No

If yes, how much?

How is it stored?

|  |
| --- |
| What are the safety precautions?       |

**20. List the five largest jobs and types in the last three years:**

|  |
| --- |
| **1.**       |
| **2.**       |
| **3.**       |
| **4.**       |
| **5.**       |

**21. Years of experience:**

**MATERIALS AND EQUIPMENT**

|  |
| --- |
| **22. List the type of owned equipment used on the job:**       |

**23. List any equipment rented and check the frequency of such rental:**

|  |
| --- |
| **EQUIPMENT RENTED** |
| **Type of Equipment** | **How often do you rent this equipment?** |
| **Daily** | **Weekly** | **Monthly** | **Yearly** |
|       | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  |
|       | [ ]  | [ ]  | [ ]  | [ ]  |

**PUBLIC PROTECTION**

**24. Do you have a written safety program?** [ ]  Yes [ ]  No

**25. How do you protect the general public from potential injury?** Check one or more:

[ ]  Rope off work area [ ]  Signs [ ]  Cones [ ]  Flashing lights [ ]  Man always on the grounds

[ ]  No protection necessary [ ]  Other (describe):

**26. How are materials lifted to the roof?** [ ]  Ladder [ ]  Hoist [ ]  Pulley [ ]  Crane

[ ]  Other (describe):

**27. Are materials and equipment left overnight at job site?** [ ]  Yes [ ]  No

**28. In what manner are openings in roof protected overnight?**

[ ]  Tarp [ ]  Waterproof plywood [ ]  Never leave openings

[ ]  Other (describe):

**29. What on-the-job precautions do you take when rained on?**

[ ]  Leave job immediately [ ]  Seal openings [ ]  Keep on working [ ]  Never start job

|  |
| --- |
| Remarks (be specific):       |

**30. Are all jobs inspected by a foreman or the contractor at completion before leaving the job site?** [ ]  Yes [ ]  No

**FRAUD WARNING:** 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 subjects such person to criminal and civil penalties. (Not applicable in AL, CO, DC, FL, KS, LA, ME, MD, MN, NE, NY, OH, OK, OR, RI, TN, VA, VT or WA.)

**FRAUD WARNING (APPLICABLE IN VERMONT, NEBRASKA AND OREGON):** Any person who intentionally presents a materially false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.

**FRAUD WARNING (APPLICABLE IN TENNESSEE, VIRGINIA AND WASHINGTON):** It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

**APPLICANT’S STATEMENT:**

I have read the above application and I declare that to the best of my knowledge and belief all of the foregoing statements are true, and that these statements are offered as an inducement to us to issue the policy for which I am applying. (Kansas: This does not constitute a warranty.)

APPLICANT’S SIGNATURE: DATE:

CO-APPLICANT’S SIGNATURE: DATE:

PRODUCER’S SIGNATURE: DATE:

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|  | **IMPORTANT NOTICE** |  |
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| As part of our underwriting procedure, a routine inquiry may be made to obtain applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided. |