

Builder's Risk Supplemental Application

		APPLI	CANT'	SINFORM	MATION					
Applicant's Name:										
Occupation:										
Employer:	enovation work to be completed:									
	CONT	RACTOR AN	D COI	NSTRUCT	ION INFO	DRMATION			*	
Name of Contractor:		General Liability Limits:								
Does the Contractor have a building Permit? (Please Circle One)					Yes			No		
s the Contractor Licensed? (Please Circle One)					Yes		No			
How Is The Construction Financed? (Please circle one of the options on the right)	Private Financing			onstruction Loan		Consumer Loan			Mortgage	
s the Risk a New Construction	or a Renovation?	118						III		
Estimated Start Date of the Proj	ect:		Esti	imated Co	mpletion	Date:				
Estimated Completed Value:				Purchase Price:						
Percentage of Construction/Renovation Completed:				After Construction is Complete, What Will Be the Occupancy of the Risk?					e Occupancy Type	
			RISK	SECURITY	Ý					
s the Community Gated? Yes		No	No Is the		ne Community Guarded		Yes		No	
s the Property Fenced? Yes No				If Fenced, What is the Height of the Fence?						
Does the Property Have a Centrally Monitored Fire Alarm?				Yes			No			
Does the Property Have a Centrally Monitored Burglar Alarm?				Yes			No			

Signature:	Date:	