

CP&P LIABILITY APPLICATION

| Plea | ase complete the following applicati | on for Contractors Professi | ional & Pollution Liability. | | | | |
|-------|---|------------------------------|---|--------------|---------------|--|--|
| App | olicant: | | | | | | |
| Add | lress: | | | | | | |
| | | | (STREET) | | | | |
| (CITY | () | | (STATE |) (7 | ZIP) | | |
| Prin | nary contact: | | | | | | |
| | | | Website address: | | | | |
| | What year was the company establ | | Website dudited: | | | | |
| | What is the total number of staff in | | | | | | |
| | | | h any other firm or business enterprise? | | \bigcirc No | | |
| | What were the company's gross an | | , | O 111 | O | | |
| | a. Last year: | _ | | | | | |
| | b. Two years ago: | | | | | | |
| | c. Three years ago: | | | | | | |
| 5. | What are the company's gross annu | ual revenues for the next 12 | 2 months? | | | | |
| 6. | In what states does the company co | | | | | | |
| | | | | | | | |
| 7. | What percentage of your company's gross annual billings are derived from each of the following disciplines? (Must equal 100%) | | | | | | |
| | % Construction/General cor | ntracting _ | % Design/Build with in-house design | | | | |
| | % Construction managemen | nt - agency _ | % Design/Build with subcontracted design | | | | |
| | % Construction managemen | nt – at risk | % Design/Consulting only | | | | |
| | | _ | % Total | | | | |
| 8. | | _ | derived from each of the following design/consulting disciplines? | | | | |
| | (With question 9, must equal 1009 | 6) | | | | | |
| | % Architect | _ | % Interior design | | | | |
| | % Chemical engineer | _ | % Land surveyor | | | | |
| | % Civil engineer | _ | % Landscape engineer | | | | |
| | % Construction building ins | pection _ | % Mechanical/HVAC engineer | | | | |
| | % Construction cost estimat | ring _ | % Plan check review | | | | |
| | % Construction managemen | nt _ | % Process engineer | | | | |
| | % Design/Build | _ | % Structural engineer | | | | |
| | % Electrical engineer | _ | % Value engineer | | | | |
| | % Fire protection engineer | _ | % Other | | | | |
| | % Forensic engineer | _ | % Other | | | | |
| | % Geotechnical | _ | % Other | | | | |



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| (With question 8, must equal 100%) | 0/ Maintananaa / Janitania | 0/ Doofing | | | | | |
|--|--|---------------------------|--|--|--|--|--|
| % Carpentry | % Maintenance/Janitorial | % Roofing | | | | | |
| % Concrete | % Mechanical/HVAC | % Soil excavation/grading | | | | | |
| % Demolition | % Metal erection | % Street & road | | | | | |
| % Dredging | % Painting | % Tunneling | | | | | |
| % Drilling | % Paving | % Other | | | | | |
| % Electrical | % Pesticide application | % Other | | | | | |
| % Fencing | % Plumbing | % Other | | | | | |
| % Landscaping | % Rigging | % Total | | | | | |
| 10. What percentage of your company's gr | What percentage of your company's gross annual billings are derived from each of the following project types/categories? (Must equal 100%) | | | | | | |
| % Airports | % Industrial/Manufacturing | % Sewer/Water systems | | | | | |
| % Apartments | % Jails/Prisons | % Stadiums/Arenas | | | | | |
| % Bridges | % Office buildings/retail | % Streets/Roads | | | | | |
| % Custom single-family homes | % Parking garages | % Tunnels/Dams | | | | | |
| % Educational facilities | % Petrochemical | % Warehouses | | | | | |
| % Golf courses | % Religious facilities | % Other | | | | | |
| % Highways | % Residential condominiums | % Other | | | | | |
| % Hospitals/Healthcare | % Residential subdivision/ | % Other | | | | | |
| % Hotels/Motels | tract developments | % Total | | | | | |
| 11 What percentage of the company's are | co appual revenues is paid to subsentiractors (subsensult | tanta? 0/ | | | | | |
| | What percentage of the company's gross annual revenues is paid to subcontractors/subconsultants?% | | | | | | |
| Specify the types of services provided | Specify the types of services provided by subcontractors/subconsultants: | | | | | | |
| | | | | | | | |
| 12. Does the company always use written | contracts with subcontractors/subconsultants? | ◯ Yes ◯ N | | | | | |
| If no, please provide details: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 13. Does the company always require subc | ontractors/subconsultants to maintain their own liability | y insurance? | | | | | |
| If no, please provide details: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Mhat percentage of gross applied rever | nues come from the company's largest client?% | | | | | | |
| +. vviiat percentage of gross affilial fevel | ides come from the company's largest chefit!% | | | | | | |



CP&P LIABILITY APPLICATION

16. Please provide information about your Professional Liability insurance for the past 5 years:

| | Carrier | Limit of Liability | Deductible | Policy | Term | |
|-----|---|---|---|---------------|-------|------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Current retroactive date: | | | | | |
| 17. | In the past 5 years: | | | | | |
| | a. Has the name of the company char | ged? | | | ○ Yes | ○ No |
| | b. Has the company purchased or me | rged with any other entities? | | | ○ Yes | ○ No |
| | c. If yes, please provide details: | | | | | |
| 8. | Does the company use written contra | cts on every project? | | | ○ Yes | ○ No |
| | If no, please provide details: | | | | | |
| 9. | Have any claims involving professiona | Il services been made against the con | npany or any predecessor company in the | last 5 years? | ○ Yes | ○ No |
| | If yes, provide complete details (attack | n additional information as necessary |): | | | |
| | | | | | | |
| | | | | | | |
| 20. | Has the company or any predecessor | company reported a potential claim t | o a professional liability carrier in the last | 5 years? | ○ Yes | ○ No |
| | If yes, provide complete details (attack | h additional information as necessary | r): | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 21. | | | mpany aware of any circumstance that cou | ıld possibly | O V | O No |
| | result in professional liability claim(s) | | Δ. | | ○ Yes | ○ No |
| | If yes, provide complete details (attack | n additional information as necessary | /): | | | |
| | | | | | | |
| | | | | | | |
| າາ | Liac any principal partner member o | fficer director or charabalder of the c | company over been the cubicct of a comple | | | |
| 22. | authorities or disciplinary action as a | - | ompany ever been the subject of a compla services? | aint to | | ○ No |
| | If yes, provide complete details (attack | | | | | |
| | , ,, (4444 | | <u>, </u> | | | |
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| | | | | | | |

FRAUD STATEMENTS / SIGNATURE

The following is part of the Application:

Applicable in AL

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution fines or confinement in prison, or any combination thereof.

Applicable in AR, LA, MD, RI and WV

Any person who knowingly (or willfully)* presents a false or fraudulent claim for payment of a loss or benefit or knowingly (or willfully)* presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

*Applies in MD Only.

Applicable in CA

For your protection California law requires the following to appear on this form. Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Applicable in CO

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Applicable in DC

WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Applicable in FL

Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Applicable in KS

A "fraudulent insurance act" means an act committed by any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto.

Applicable in KY

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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.

Applicable in ME

It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

Applicable in NJ

Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Applicable in NM

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

Applicable in NY

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 shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Applicable in OH

Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is quilty of insurance fraud.

Applicable in OK

WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Applicable in OR

Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact may be violating state law.

Applicable in PA

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.

Applicable in PR

Any person who knowingly and with the intention of defrauding presents false information in an insurance application, or presents, helps, or causes the presentation of a fraudulent claim for the payment of a loss or any other benefit, or presents more than one claim for the same damage or loss, shall incur a felony and, upon conviction, shall be sanctioned for each violation by a fine of not less than five thousand dollars (\$5,000) and not more than ten thousand dollars (\$10,000), or a fixed term of imprisonment for three (3) years, or both penalties. Should aggravating circumstances be present, the penalty thus established may be increased to a maximum of five (5) years, if extenuating circumstances are present, it may be reduced to a minimum of two (2) years.

Applicable in TN and VA

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.

Applicable in WA

It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purposes of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

APPLICANT'S STATEMENT: I HAVE READ THE ABOVE APPLICATION AND ANY ATTACHMENTS. I DECLARE THAT THE INFORMATION PROVIDED IN THEM IS TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS INFORMATION IS BEING OFFERED TO THE COMPANY AS AN INDUCEMENT TO ISSUE THE POLICY FOR WHICH I AM APPLYING.

| PRODUCER'S SIGNATURE | PRODUCER'S NAME (Please Print) | | STATE PRODUCER LICENSE NO. (Required in FL) |
|-----------------------|--------------------------------|------|--|
| APPLICANT'S SIGNATURE | | DATE | NATIONAL PRODUCER NUMBER |