

WRAP UP APPLICATION FOR LIABILITY INSURANCE

I. GENERAL INFORMATION

Named Insured(s):

Mailing Address:

Project Named & Address:

Project Start Date:

Project Completion Date:

Has the financing been secured, including financing for the per occurrence SIR:

What is the source of financing:

II. PROJECT DETAILS

Describe the project & the surrounding exposures (provide site maps where possible):

Describe the area/topography & exposure to hillsides:

Has the land been developed, if so, provide details including who developed it:

Estimated payroll for the subcontractors: Subcontractor payroll breakout:

Estimated construction costs for project term:

Construction cost definition: The total cost of all work let or sublet in connection with each specific project including (1) the cost of all labor, materials and equipment furnished, used or delivered for use in the execution of the work; and (2) all fees, bonuses or commissions made, paid or due.

Provide the type of construction projected:

	# of units	# of buildings	# of stories	Construction Type
Single Family Dwellings:				
Townhouses:				
Condominiums:				
Apartments:				
Other:				
If other is applicable please describe:				

III. BACKGROUND/EXPERIENCE OF BUILDER/GENERAL CONTRACTOR Describe the past experience/expertise of the Builder:

List of jobs completed by Builder during last 3 years:

Name and mailing address of General Contractor for Wrap Up:

Experience of General Contractor:

For the GC/Builder, provide 7 years of loss history (attach currently valued company's loss runs):

A. Claims History

- 1. Have there ever been any claims or suits for any of the Named Insured's for construction defects:**
- 2. Attach details on any claim or suit in excess of \$50,000 and on "all" construction defect claims or suits; include a list of all pending litigation on all projects within the last ten years involving construction defect claims or suits:**

B. Pre-Construction Operations

1. Does the Named Insured purchase land for building that is undeveloped?
2. When the Named Insured purchases land for building, is it generally partially or completed developed?
 - a. To what extent is the land developed by the Named Insured?
 - b. If the Named Insured purchases undeveloped land that is not leveled, identify whom they normally hire to do such leveling:
 - c. Does the Named Insured test all land, even if partially developed prior to purchasing for development?
Or, does it only rely upon the soil tests supplied by the seller?
 - d. **Does the seller hold the Named Insured harmless?**
 - e. Does the Named Insured have a soils engineer on staff?
If not, is an independent soil engineer employed?
Does the Named Insured intend to implement soil engineer recommendations in the building foundation design and site preparation?
Does the soil engineer hold the Insured harmless and name it as an additional insured?

What coverage limits does the soil engineer carry?

- f. Does the Named Insured design its product using in-house architects? Do they employ outside architects for the purpose of design?
If outside architects are employed, do they hold the Named Insured harmless and name it as an additional insured? What coverage limits do the architects carry?

3. Site conditions for constructing:

- a. What is the steepest slope gradient (horizontal:vertical) of the land upon which the project is being built:

>10:1	>3:1	>2:1	2:1	<2:1
Flat	Gentle	Less steep	Steeper	Very steep

- g. What is the greatest slope height (feet) of the land on which the project is being built.

>10:1	>3:1	>2:1	2:1	<2:1
Flat	Gentle	Less steep	Steeper	Very steep

- h. What is the thickest fill depth (feet) of the land on which the project is being built.

>10:1	>3:1	>2:1	2:1	<2:1
Flat	Gentle	Less steep	Steeper	Very steep

C. Quality Control Program

1. Does the Named Insured have a Quality Control Program in effect to monitor all construction activities?
2. Does the Named Insured utilize a quality assurance company? If yes,
 - a. Which Company?
 - b. When was the program implemented?
 - c. When was the program last revised?
 - d. Who is responsible for managing the program?
 - e. Briefly describe the program and/or attach a copy of the program to this questionnaire:
3. Does the Named Insured have a written procedure requiring that videos and /or photos be taken of the construction job?
If yes,
 - a. Please attach underwriting information. Such information should include a log of procedures, benchmarks or progress from inception to completion and retention/archiving practices.
4. Does the Named Insured have a written Site Inspection Program? If yes:
 - a. When was this program established?
 - b. When are the inspections performed?
 - c. Who determines the inspection schedule?

- d. Describe the established criteria for required follow-up:
 - e. Explain if surprise inspections are conducted:
5. Does the Named Insured have any Independent Inspections/Assessments performed? If yes,
- a. **Provide a brief description of these services:**

6. Does the Named Insured generate project or home specific reports during the time of construction? If yes,
- a. Briefly describe the types of reports generated:
 - b. Who generates these reports?
 - c. Who monitors these reports?
 - d. Are there established procedures for handling these reports, including follow-up procedures on identified issues? Please explain.
7. Does the Named Insured have an established program for Trade Partner training? If yes,
- a. When does the training take place?
 - b. Does the program stipulate that there be periodic updates for any planned project wide changes.
8. Does the Named Insured have an approved list of vendor material to be used in construction projects?
9. Does the Named Insured centrally purchase materials?

D. Safety Program

1. Does the Named Insured have a written safety program? If yes:
- a. Who is designated as the safety manager on site for each project?
 - i. Is the designated person on site full time?
 - b. Does the program require that there be scaffolding and fall protection?
 - i. What height requirement is maintained?
 - c. Does the Named Insured have access control for customers and future customers on job sites?
 - d. Does the Named Insured have a drug free policy in place?
 - e. Does the Named Insured have any safety incentive programs?
 - i. If yes, provide a brief description:

2. Does the safety manual specifically address:

a.		Yes	No	Not applicable
b.	Site Security?			
c.	Attractive Nuisance?			
d.	Power Lines?			
e.	Traffic Control?			
	Utility Identification?			

E. Sub-contractors

1. Describe the process the Named Insured uses in qualifying and selecting subcontractors:
 - a. **Minimum number of years that the Named Insured requires subcontractors to have been in the business?**
 - b. **What percentage of time does the Named Insured use the same subs contractors?**
 - c. **Does the Named Insured hire subcontractors with Workers Compensation modifications of 1.25 or higher?**

F. Post Construction Operations

1. Does the Named Insured have a written procedure for conducting final inspections for each dwelling at completion?
If yes,
 - a. Are these final inspections documented?
 - b. How long is documentation maintained?
2. Does the Named Insured conduct walk through inspections with the buyers? If yes,
 - a. Is a checklist used?
3. Does the Named Insured provide Homeowners Manuals to the buyers?
4. Does the Named Insured establish Customer Service Lines for all projects?
5. Does the Named Insured solicit and obtain homeowner surveys? If yes,
 - a. Explain how the database of the surveys are maintained:
 - b. How long are the surveys retained in the database?
- 6. Does the Named Insured have SB800 procedures in place?**
- 7. Please include copies of the sales agreement for condo owners on conversions.**

G. Home Warranty Program

- For single family dwellings, townhouses and condominiums, are Home Warranty policies in place? If yes,
- a. For how long?
 - b. What is the duration of these policies?
 - c. Are these policies renewable by the dwelling owner?
 - d. What is the Named Insured's turn around time on "fixing" problems under warranty?
 - e. Who does warranty repairs?
 - f. Is there a database monitoring system for the Warranty Program?
If yes, provide a description of the system?
 - g. Are warranty claims and loss records maintained?
 - h. Who is responsible for monitoring the warranty program?

H. Condo Conversions

- a. For condo conversions is Named Insured holding seller harmless for seller's negligence?
- b. For condo conversions does Named Insured sell the units as used?
- c. For condo conversions does the Named Insured provide a warranty to the Homeowner? If yes, is it limited to

only those items that the Named Insured can adequately inspect and verify prior to the sale of the units?

- d. For condo conversions, is there a lead exposure, pipes or paint? Year built? _____
- e. Is seller to be named as a Named Insured?
- f. If there is a tenant exposure, what loss control measures are taken to protect tenants from injury during the renovation process?

Authorized Signature

Date

Company

4820-5023-9747, v. 1

SPECIMEN