

Covers concrete contractors: foundations, flatwork, structural and tilt-up concrete, decorative concrete, and concrete cutting and pumping. Masonry uses the masonry form. Complete with ACORD 125, 126, and 130.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME	DBA	FEIN	YEARS IN BUSINESS
BUSINESS ADDRESS	CITY / STATE / ZIP	WEBSITE	

Entity type:
☐ Sole proprietor ☐ Partnership ☐ LLC ☐ Corporation

PRIMARY CONTACT / TITLE	PHONE	EMAIL

CONTRACTOR LICENSE NO(S) / STATES	CONCRETE PUMPS / MIXERS OWNED

2 OPERATIONS

PERIOD	DIRECT PAYROLL (\$)	EMPLOYEES	SUBCONTRACTOR COSTS (\$)	GROSS RECEIPTS (\$)

Periods: next 12 months (estimated); prior 12 months; second prior year.

TYPE OF WORK	% OF RECEIPTS

Types: residential foundations; flatwork (driveways, sidewalks, slabs); structural / elevated concrete; tilt-up; decorative and polished concrete; cutting, coring, and demolition; pumping; other.

2-1 Does the applicant pour elevated or structural concrete requiring formwork and shoring? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-2 Does the applicant cut, grind, core, or drill concrete? ☐ Yes ☐ No
 IF YES, EXPLAIN

2-3 Does the applicant operate concrete pumps? ☐ Yes ☐ No
 IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — SILICA, FORMWORK & POURS

OSHA's construction silica standard has been among its most-cited rules since 2019: cutting, grinding, and drilling concrete require water or vacuum controls. Formwork and shoring that fail under wet concrete cause the most severe concrete-site accidents.

3-1 If yes to 2-2, are OSHA Table 1 silica controls (water or vacuum) used on every cutting and grinding task? ☐ Yes ☐ No
 IF YES, EXPLAIN

3-2 Is there a written silica exposure control plan with a competent person? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-3 Are workers who need respirators medically cleared and fit-tested? ☐ Yes ☐ No
 IF NO, EXPLAIN

3-4	If yes to 2-1, is formwork and shoring designed by a qualified engineer for elevated pours?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-5	If yes to 2-1, is formwork inspected by a competent person before and during every pour?	☐ Yes ☐ No
IF NO, EXPLAIN		
3-6	If yes to 2-3, are pump booms inspected before each pour?	☐ Yes ☐ No
IF NO, EXPLAIN		
3-7	If yes to 2-3, are pump booms kept at safe clearance from power lines?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-8	Has formwork or shoring collapsed in the last 5 years?	☐ Yes ☐ No
IF YES, EXPLAIN		
3-9	Has a worker been seriously injured in the last 5 years?	☐ Yes ☐ No
IF YES, EXPLAIN		

4 EXPOSURE & RISK QUESTIONS — FOUNDATIONS, FLATWORK & SUBCONTRACTORS

4-1	Are soil conditions and compaction verified before foundations and slabs are poured?	☐ Yes ☐ No
IF NO, EXPLAIN		
4-2	Are concrete mix tickets and test results kept for structural pours?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-3	Are certificates of insurance collected from every subcontractor before work begins?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-4	Is the applicant named as additional insured on subcontractors' policies, on a primary and non-contributory basis?	☐ Yes ☐ No
IF NO, EXPLAIN		
4-5	Does every subcontractor sign a written contract with a hold-harmless clause in the applicant's favor?	☐ Yes ☐ No
IF NO, EXPLAIN		
4-6	Are subcontractors required to carry workers' compensation, with proof verified?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-7	Are subcontractors' insurance limits at least equal to the applicant's?	☐ Yes ☐ No
IF YES, EXPLAIN		
4-8	Has the applicant been accused of foundation cracking, settlement, or slab failure?	☐ Yes ☐ No
IF YES, EXPLAIN		

5 PAYROLL & RECEIPTS SUMMARY

TOTAL ANNUAL PAYROLL (\$)	ANNUAL GROSS RECEIPTS (\$)	SUBCONTRACTOR COSTS (\$)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

GL CARRIER / LIMITS

CONTRACTOR'S EQUIPMENT LIMIT

COMMERCIAL AUTO CARRIER

6-1 Has any carrier declined, cancelled, or non-renewed coverage in the last 5 years?

☐ Yes ☐ No

IF YES, EXPLAIN

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED (\$)	OPEN / CLOSED

6-2 Is the applicant aware of any incident, complaint, or circumstance not yet resulting in a claim that could reasonably give rise to one?

☐ Yes ☐ No

IF YES, EXPLAIN

7 RISK MANAGEMENT

7-1 Are mixer trucks and pump operators' driving records checked?

☐ Yes ☐ No

IF NO, EXPLAIN

7-2 Are job-site safety meetings held weekly?

☐ Yes ☐ No

IF YES, EXPLAIN

8 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: 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, may be committing a fraudulent insurance act, which is a crime and may subject such person to criminal and civil penalties. State-specific fraud warnings appear on the insurer's application.

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)

TITLE

DATE

PRODUCER — CORY WASHINGTON & CO. LLC

PRODUCER SIGNATURE (TYPE FULL NAME)

DATE