Covers wood and light-gauge steel framing contractors, including truss setting and sheathing. Finish carpentry uses CWCO-SUP-CARPENTER. 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	FRAMING CREWS

2 OPERATIONS

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

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

RESIDENTIAL (%)	MULTIFAMILY / CONDO (%)	MAX STORIES FRAMED	SUBCONTRACTED LABOR (%)

2-1 Does the applicant frame multifamily or condominium buildings? ☐ Yes ☐ No
IF YES, EXPLAIN

2-2 Does the applicant set roof or floor trusses? ☐ Yes ☐ No
IF YES, EXPLAIN

2-3 Does the applicant use labor-only subcontracted crews? ☐ Yes ☐ No
IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — FALLS, TRUSS SETTING & BRACING

Framing drew the second-most OSHA citations of any construction trade after roofing, driven by fall protection. Unbraced walls and trusses can also collapse during erection, injuring the crew and anyone nearby.

3-1 Is fall protection (guardrails, personal fall arrest, or a written fall-protection plan) used on every job? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Are floor openings and stairwells covered or guarded as soon as they're created? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3 If yes to 2-2, are trusses braced per the manufacturer's and BCSI guidance during erection? ☐ Yes ☐ No
IF YES, EXPLAIN

3-4 Are walls temporarily braced until permanently tied in? ☐ Yes ☐ No
IF YES, EXPLAIN

3-5 Are nail guns used with sequential (single-shot) triggers? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 Are employees trained on nail-gun safety before using them? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Is a competent person on every site to inspect fall protection daily? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Has a worker fallen or a structure collapsed during framing in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — STRUCTURAL WORK & SUBCONTRACTED CREWS

4-1 Is framing built to engineered plans, with deviations approved in writing? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Are framing inspections passed before the next trade covers the work? ☐ 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 YES, EXPLAIN

4-5 Does every subcontractor sign a written contract with a hold-harmless clause in the applicant's favor? ☐ Yes ☐ No
IF YES, 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 structural or framing defects? ☐ 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	WORKERS' COMP CARRIER / MOD	UMBRELLA LIMIT

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 new employees trained on fall protection before working at height? ☐ Yes ☐ No

IF YES, 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, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. (State-specific fraud warnings apply; see state amendatory notice.)

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)	TITLE	DATE

PRODUCER — CORY WASHINGTON & CO. LLC	PRODUCER SIGNATURE (TYPE FULL NAME)	DATE