GENERAL CONTRACTOR SUPPLEMENTAL

Covers general contractors, construction managers, and design-build contractors. Specialty trade contractors use their dedicated CWCO trade forms, or CWCO-SUP-CONTRACTOR if none exists. Complete with ACORD 125, 126, and 130. Attach currently-valued five-year loss runs.

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	LARGEST PROJECT IN LAST 3 YEARS ($)

2 OPERATIONS

Role on projects (check all that apply):

☐ General contractor ☐ Construction manager (at risk) ☐ Construction manager (agency) ☐ Design-build ☐ Owner-builder / developer

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

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

PROJECT TYPE	% OF RECEIPTS	NEW OR REPAIR/REMODEL

Project types: single-family homes; multifamily; condominiums and townhomes; commercial; industrial; public / infrastructure; other.

2-1 Does the applicant build condominiums or townhomes for sale? ☐ Yes ☐ No

IF YES, EXPLAIN

2-2 Does the applicant work under wrap-up programs (OCIP / CCIP)? ☐ Yes ☐ No

IF YES, EXPLAIN

2-3 Does the applicant own land, development property, or model homes? ☐ Yes ☐ No

IF YES, EXPLAIN

2-4 Has the applicant allowed its license to be used by another contractor? ☐ Yes ☐ No

IF YES, EXPLAIN

3 EXPOSURE & RISK QUESTIONS — SUBCONTRACTORS, SITE SAFETY & CONSTRUCTION DEFECT

A general contractor answers for everyone on its sites. Fall protection has led OSHA's most-cited list for more than a decade — 8,797 citations in 2024 alone — and residential construction-defect claims can follow completed work for years. Subcontractor risk transfer is the core defense.

3-1 Are certificates of insurance collected from every subcontractor before work begins? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 Is the applicant named as additional insured on subcontractors' policies, on a primary and non-contributory basis? ☐ Yes ☐ No
IF YES, EXPLAIN

3-3 Does every subcontractor sign a written contract with a hold-harmless clause in the applicant's favor? ☐ Yes ☐ No
IF YES, EXPLAIN

3-4 Are subcontractors required to carry workers' compensation, with proof verified? ☐ Yes ☐ No
IF YES, EXPLAIN

3-5 Are subcontractors' insurance limits at least equal to the applicant's? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 Is there a written site-safety program covering all trades? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Is a competent person designated on every site? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Is fall protection required and checked for every trade working 6 feet or more above a lower level? ☐ Yes ☐ No
IF YES, EXPLAIN

3-9 Are projects documented with photos and inspections at key stages (foundation, framing, waterproofing)? ☐ Yes ☐ No
IF YES, EXPLAIN

3-10 Is there a written warranty and customer-service program for completed homes? ☐ Yes ☐ No
IF YES, EXPLAIN

3-11 Has the applicant been accused of faulty construction or construction defect in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — HIGHER-HAZARD WORK & OPERATIONS

Higher-hazard operations (check all that apply):

☐ Structures over 4 stories ☐ Demolition ☐ Excavation over 10 ft. ☐ Crane operations ☐ Roofing (hot work)
☐ Work at airports, rail, or utilities ☐ Marine / USL&H work ☐ Blasting

4-1 Does the applicant lease cranes or other equipment to others? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Is a hot-work permit and fire watch used for torch-applied roofing and welding? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Are builder's risk and installation exposures insured on every project? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Has the applicant filed bankruptcy in the last 5 years? ☐ 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	UMBRELLA LIMIT	BUILDER'S RISK (Y / N)

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 Has the applicant been accused of breaching a contract in the last 5 years? ☐ Yes ☐ No

IF YES, EXPLAIN

7-2 Has the applicant filed or had filed against it a mechanics lien in the last 5 years? ☐ 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