

For businesses whose operations are usually placed in the excess and surplus market — demolition, blasting, fireworks, cranes, work at height, hazardous materials, motorsports, and similar. Complete with the applicant's business supplemental and ACORD 125/126. Attach safety programs, licenses and permits, subcontract templates, and 5 years of 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

☐ Other

PRIMARY CONTACT / TITLE

PHONE

EMAIL

LICENSES / PERMITS (ATF, STATE, OSHA)

ANNUAL REVENUE (\$, ILLUSTRATIVE)

2 HAZARDOUS OPERATIONS

Operations performed (check all):

☐ Demolition

☐ Blasting / explosives

☐ Fireworks / pyrotechnics

☐ Crane / rigging

☐ Work over 3 stories

☐ Hazardous materials handling

☐ Confined space

☐ Underground / tunneling

☐ Oil, gas, or energy work

☐ Motorsports / racing

☐ Amusement rides

☐ Aviation / crop dusting

☐ Hazardous manufacturing

☐ Other

DESCRIBE THE HIGHEST-HAZARD WORK PERFORMED, WHERE, AND HOW OFTEN

OPERATION	% OF REVENUE	DONE BY EMPLOYEES OR SUBCONTRACTORS

Volume:

Employees

Subcontractors used

Jobs or events per year

Largest single job (\$)

States worked in

3 EXPOSURE & RISK QUESTIONS — SAFETY & CONTROLS

Demolition, fireworks, amusement and auto racing, and similar classes are now on Delaware's surplus lines export list, so they can be placed in the E&S market without first being declined by standard insurers.

3-1 Is there a written safety program for each hazardous operation, reviewed in the last year?

☐ Yes

☐ No

IF YES, EXPLAIN

3-2 Is a dedicated safety director or competent person on staff?

☐ Yes

☐ No

IF YES, EXPLAIN

3-3 Are site-specific hazard assessments or permits completed before each job or event?

☐ Yes

☐ No

IF YES, EXPLAIN

3-4 Are explosives, fuels, or chemicals stored in licensed, inspected magazines or storage areas?

☐ Yes

☐ No

IF YES, EXPLAIN

3-5 Are crane operators and riggers certified, and are lifts planned in writing?

☐ Yes

☐ No

IF YES, EXPLAIN

3-6 Has the business received an OSHA, ATF, or fire marshal citation in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Has there been a fatality, explosion, collapse, or serious injury in the last 10 years? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Are spectators or the public kept outside a marked safety zone during operations? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — CONTRACTS & RESTRICTIVE ENDORSEMENTS

E&S policies for high-hazard work often add endorsements that remove coverage, such as injury-to-contractor exclusions, subcontractor warranties that void coverage if conditions are not met, and total pollution exclusions.

4-1 Are all subcontractors required to carry insurance at limits equal to the applicant's, with the applicant as additional insured? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Are certificates and endorsements collected and tracked for every subcontractor before work starts? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Do contracts require the applicant to indemnify owners or general contractors? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Is any work performed in New York or under other scaffold or labor laws that impose strict liability? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Does the business do any residential work, including condominiums? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Could the operations release pollutants (dust, fuels, chemicals, smoke) beyond the site? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Has the applicant reviewed and accepted any exclusions on its current policy (injury to contractors, classification limits, height)? ☐ Yes ☐ No
IF YES, EXPLAIN

5 COVERAGE REQUESTED, PRIOR INSURANCE & LOSS HISTORY

Attach currently-valued loss runs for the last 5 years.

LIMITS REQUESTED (\$) UMBRELLA / EXCESS REQUESTED (\$) REQUESTED EFFECTIVE DATE

CURRENT CARRIER (ADMITTED OR E&S) CURRENT LIMITS / DEDUCTIBLE EXPIRATION DATE

5-1 Has any carrier declined, cancelled, or non-renewed coverage in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

5-2 Has any claim been denied because of an exclusion or warranty in the policy? ☐ Yes ☐ No
IF YES, EXPLAIN

DATE OF LOSS	DESCRIPTION (OPERATION, INJURY OR DAMAGE)	TOTAL INCURRED (\$, ILLUSTRATIVE)	OPEN / CLOSED

5-3 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

6 RISK MANAGEMENT & SAFETY

6-1

Is safety training documented for every employee before hazardous work?

☐ Yes ☐ No

IF YES, EXPLAIN

6-2

Is there a written emergency response plan coordinated with local responders?

☐ Yes ☐ No

IF YES, EXPLAIN

6-3

Are equipment inspections and maintenance documented?

☐ Yes ☐ No

IF YES, EXPLAIN

7 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