

## APPLICATION/QUESTIONNAIRE COURSE OF CONSTRUCTION

## COURSE OF CONSTRUCTION / BUILDERS RISK

## PLEASE ANSWER ALL QUESTIONS IF THEY DO NOT APPLY, INDICATE "N/A" - IF SPACE IS INSUFFICIENT PLEASE USE SEPARATE SHEETS

Naı	me of Insured(s):	
Mai	iling Address:	Postal Code:
Pro	ject Name:	
а.	Occupancy when completed:	
Naı	me of Mortgagees/Loss Payees:	
Иai	iling Address:	Postal Code:
Site		
э.	Address:	
b.	Nature of Ground: Flat Other:	Hillside Swampy
с.	Soil: Shale Other:	Sand Rock Filled ground
d.	Public Fire Protection: Protected	Semi-Protected Un-Protected
Γot	al Insured Value (TIV)	
э.	Structure:	\$
b.	Interior finishing:	\$

	С	Mechanical/Elec	trical:	\$					
	d.	Value below gra	ade:	\$					
	e.	Other (soft cost	s, etc. describe):						
		Sublimits:	1	ransit:	! <u> </u>			Offsite:	
6.	Cor	ntract Period:							
	a.	Number of mor	nths:	b.	Effe	ctive date:			
	c.	Periods of trans	sport, pre-storage, part	ial occi	upar	ncy:			
7.	Cor	ntract Works:							
	a.	No. of storeys a	above grade:		_	Heigh	nt:	Metres	
	b.	No. of basemer	nts:		_	Dept	h:	Metres	
	c.	Dimensions of o	grade floor:						
	d.	Total square fo	otage:						
	e.	Exterior Walls:	Wo Steel on S Other (describ	L		Brick Veneer Concrete		Concrete Block Insulated Panels	
		Interior Walls:	Wood Par Other (describ			Gypsum Boards		Concrete Blocks	
		Studs:	Wood St	uds [		Metal Studs			
		Foundation:							
		Floors:	Wood J Other (describ	L		Concrete on Steel		Precast/Poured Concrete	
		Roof:	Wood J Precast/Poured Concr	_				Steel Deck Concrete on Steel	

		Other details:						
	f.	Blasting:	Piling:					
		Underpinning:	Dewatering (e.g. Number of Pumps):					
	g.	Forms and Form Supports:						
		Wood forms/support:	Yes No Period of usage:					
		Steel forms/supports:	Yes No Period of usage:					
	h.	Temporary heating:	Yes No Type:					
	i.	Insulation:	Yes No Type:					
8.	Ha	zards:						
	a.	Flood/inundation:						
		Height above nearest water	(Min. 5yr. or 10 yr. History):					
		Distance from nearest body	of water:					
		Name of body of water:						
	b.	Earthquake (Zone):						
	c.	Windstorm:						
	d.	Transit:						
	e.	Surrounding occupancy (exposures and separation):						
	f.	Other:						
9.	Spe	ecial Precautions:						
	a.	Theft, Malicious Damage:	Site fenced Lighting Standard watchman					
		(	Other (describe):					
	b.	Fire (describe private protec	tion during construction):					
			Fire Hose Portable fire extinguisher					
			Hydrant protection Hot work permit system					

Sco	ope of Coverage	Desirear		
a.	All Risks:	CCDC 201	Other (describe):	
	including/exclu	ding:		
b.	Transit:			
c.	Unnamed Loca	tions (Canada Only)		
d.	Other Coverage	<del>2</del> S:		
Dec	ductibles:			
a.	All perils excep	t:		
b.	Other perils:			
Lis	t Loss History f	or Past 5 Years:		
	DATE		CAUSE	AMOUNT
Cor	ntractor's Name	e (If not insured)	:	
Cor a.	ntractor's Name	very well exper	rienced	experienced unknown
		very well exper	rienced	
a.	Experience:	very well exper	rienced	<u> </u>
a.	Experience:	very well exper	rienced	· <u> </u>

## THE UNDERSIGNED HEREBY ACKNOWLEDGES THE TRUTH OF THE STATEMENTS CONTAINED HEREIN.

I AUTHORIZE YOU TO COLLECT, USE AND DISCLOSE PERSONAL INFORMATION AS PERMITTED BY LAW, IN CONNECTION WITH YOUR COMMERCIAL INSURANCE POLICY OR A RENEWAL, EXTENSION OR VARIATION THEREOF, FOR THE PURPOSES NECESSARY TO ASSESS THE RISK, INVESTIGATE AND SETTLE CLAIMS, AND DETECT AND PREVENT FRAUD, SUCH AS CREDIT INFORMATION, AND CLAIMS HISTORY.

For purposes of the Insurance Companies Act (Canada), this document was issued in the course of Lloyd's Underwriters' insurance business in Canada.

Signature of Applicant (authorized representative)	Date
SUBMITTED BY:	
EMAIL:	

For contact information visit:

www.markelinternational.ca