

Swett & Crawford

BUILDER'S RISK APPLICATION

1. Applicant's Name as it will appear on the policy: _____
2. Applicant's Mailing Address: _____
(Number & Street/City, State & ZIP) _____
3. The Applicant is: Individual Partnership Corporation
 Joint Venture Other (describe) _____
4. The Applicant's interest in the construction is that of: Owner General Contractor
 Other (describe) _____
5. Policy Period desired: From: _____ To: _____
6. Has another prospective carrier refused this coverage? Yes No
7. Applicant's previous (5 year) loss history for this type of coverage - whether covered by insurance or not:

8. Other coverage(s) written with _____ (Type of coverage and policy number[s])

9. Give name, title and telephone number of the person in the Applicant's organization to contact if a Loss Control Inspection is required: _____
10. Project Details:
Location of Project (Number & Street/City, State & ZIP) _____
Intended Occupancy: _____
Commencement Date of Construction: _____ Estimated time for construction: _____
Construction of floors: _____ Walls: _____ Roof: _____
Number of stories: _____ Total square feet: _____
Construction project is: New Construction Addition to existing building Renovation
 Other (describe) _____
If addition to an existing building or renovation, give the existing:
Construction: _____ Occupancy: _____
ACV of building: \$ _____ Name of building owner: _____
11. Fire protection at construction premises:
Public Protection Class: _____ Number of hydrants: _____ Distance to hydrants: _____
Are hydrants in service during construction? Yes No
Describe fire protection facilities and/or equipment on site: _____
Describe exposures within 50 ft.: _____

12. Vandalism & Theft Protection at construction premises:

Construction site fenced? Yes No Locked? Yes No Flood lights? Yes No

Watchmen? Yes No Number on duty when normal operations not being conducted: _____

Each Watchman will have access to public phone on premises? Yes No

Each Watchman will: (a) register at least hourly on Watchman's clock? Yes No

(b) signal an outside central station at least hourly? Yes No

Describe protection at temporary storage location(s): _____

13. Transit:

Is property in transit shipped at the risk of applicant? Yes No

Is Release Valuation declared to Carriers for Hire? Yes No

Give Total Project and Average Values to be shipped by:

	Total Project Value	Average Shipment Value
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a. Common or Contract Motor Carrier	\$ _____	\$ _____
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b. Rail	\$ _____	\$ _____
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c. Vehicles owned or operated by the Applicant	\$ _____	\$ _____
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14. Flood:

Nearest body of water: _____

Past flood history: _____

Height of project above flood stage: _____

15. Earth Movement:

Is project site subject to subsidence or land movement? Yes No

Is soil report available? Yes No

16. Name and address of Architect or Design Engineer: _____

17. Name and address of General Contractor: _____

Are interests of Sub-Contractors to be included? Yes No

If Yes, list sub-contractors: _____

18. Limits of insurance desired applying to:

A. Structures at the Described Premises: \$ _____

B. Materials and Supplies while in:

1. Transit: \$ _____

2. Temporary Storage: \$ _____

C. Maximum Limit: \$ _____

19. Deductible: \$ _____

20. Coverage Options Desired:

A. Rents: If Rental Income Coverage is desired, state Limit of Insurance requested: \$ _____

(Waiting Period) Deductible: \$ _____

Optional Monthly Limitation 1/3 1/4

B. Soft Costs: If Soft Costs Coverage is desired, state Limit of Insurance requested: \$ _____

(Waiting Period) Deductible: \$ _____

Monthly Limit of Indemnity: 1/12 1/6 1/4 1/3

C. Reporting: If Reporting Coverage is desired, state Limit of Insurance requested: \$ _____

Adjustment Period Desired: Monthly Quarterly Annual

D. Flood: Limit of Insurance Desired: \$ _____

Deductible Amount: \$ _____

Coverage Form: _____

E. Earthquake: Limit of Insurance Desired: \$ _____

Deductible Amount: \$ _____

Coverage Form: _____

PRODUCER INFORMATION

1. Your name _____

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT WHICH IS A CRIME.

Signature of Applicant: _____ Date: _____

BUILDER'S RISK APPLICATION RENOVATION SUPPLEMENT

21. Did the insured recently purchase the building? Yes No
If Yes, (a) What was the actual purchase price? _____
(b) What is the age of the building? _____

22. Please specify what type of work will be done to the building: _____

23. Will any structural alterations be made such as: complete removal of the roof, movement of bearing wall and/or support beams, additional floors? Yes No
If Yes, describe: _____

24. Will any part be occupied during renovations? Yes No
If Yes, which part(s)? _____ Type of occupancy: _____

25. Was the building ever involved in a fire? Yes No
If Yes, what was the cause of the fire? _____
What was the extent of the damage? _____
Has building been inspected by a structural engineer? Yes No

26. Has any of the work been done yet? Yes No
If Yes, how much? _____

27. What is the insured's building permit number? _____

28. What is the contract price of the new work to be done? _____

29. What is the project completion date? _____

Signature of Applicant: _____ Date: _____

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SOFT COSTS

This endorsement modifies insurance provided under the following:

BUILDERS RISK COVERAGE FORM
 BUILDERS RISK RENOVATION COVERAGE FORM
 INSTALLATION COVERAGE FORM

PREMISES LOCATION(S):	
SUB-LIMITS OF SOFT COSTS:	
Interest Expense on money you borrow to finance construction or reconstruction:	\$ <u>N/A</u>
Real estate or property taxes:	\$ <u>N/A</u>
Advertising and promotional expense:	\$ <u>N/A</u>
Insurance expenses:	\$ <u>N/A</u>
Commissions, legal and accounting costs and fees, and administrative expenses incurred as a result of a necessary renegotiating of a lease or leases:	\$ <u>N/A</u>
Architectural fees, building inspection and permit fees and charges:	\$ <u>N/A</u>
Storage Charges:	\$ <u>N/A</u>
Survey Costs:	\$ <u>N/A</u>
TOTAL SOFT COSTS:	\$ _____
WAITING PERIOD:	_____ Number of days

A. Coverage

The following is added to **Coverage**:

We will pay for the actual and necessary "Soft Costs" expense you sustain as a direct result of delay in the completion of "Construction Operations". The delay must be directly caused by loss or damage covered under this coverage form.

This coverage only applies to premises for which a Limit of Insurance applicable to "Soft Costs" is shown in the above schedule.

We will pay your "Soft Costs" for the period of time reasonably required to repair or replace the damaged property, but for not more than the period of time that final completion of the project is delayed. This period of time will not be limited by the expiration date of the policy.

B. Additional Coverage

1. Expense To Reduce Payment

We will pay any necessary expenses you incur to reduce the amount of "Soft Costs" payment under this endorsement.

2. Civil Authority

We will pay for the actual and necessary "Soft Costs" expenses you sustain caused by action of civil authority that:

- a. Prohibits access to the described property; and

- b. Is taken in response to direct physical loss or damage to property, other than property at the described premises, caused by a Covered Cause of Loss. This additional coverage will apply for two consecutive weeks.

Payment under these Additional Coverages will not increase the Limit of Insurance.

C. Additional Exclusions

We will not pay for:

1. Any "Soft Costs" expenses caused by or resulting from:
 - a. Delay in rebuilding, repairing or replacing property, or resuming "Construction Operations", due to interference at the location of the rebuilding, repair or replacement by strikers or other persons charged with rebuilding, repairing or replacing the damaged property;
 - b. Suspension, lapse or cancellation of any license, lease or contract. But we will cover your "Soft Costs" if the suspension, lapse or cancellation results from a Covered Cause of Loss under the Builders Risk Coverage Form; or
 - c. Costs to test for, monitor or assess the existence, concentration or effects of "pollutants".
2. Any other indirect loss or damage.

D. Limits Of Insurance

The most we will pay for "Soft Costs" expense in any one occurrence is the Limit of Insurance shown in the above schedule.

E. Waiting Period

If a Waiting Period is shown in the above schedule, we will pay only if the delay in completion of the project beyond the projected completion date exceeds the Waiting Period. We will pay only those covered "Soft Costs" expenses that you incur after the Waiting Period ends.

The projected completion date will be determined by us at the time of the loss.

The Waiting Period begins when "Construction Operations" would have ended had there been no loss under your Builders Risk Coverage Form.

F. Additional Conditions

1. Resume "Construction Operations"

In the event of loss or damage under your Builders Risk Coverage Form you must resume all or part of your "Construction Operations" as quickly as possible.

2. Loss Determination

- a. The amount of "Soft Costs" will be determined based on relevant sources of information, including:
 - (1) Your financial records and accounting procedures;
 - (2) Bills, invoices and other vouchers;
 - (3) Deeds, liens or contracts; and
 - (4) Construction records and project progress reports.
- b. We will reduce the amount we will pay for your "Soft Costs" to the extent you can resume your "Construction Operations" in whole or in part, at the described premises or elsewhere.

G. Definitions

The following additional definitions apply to this endorsement:

1. "Construction Operations" means the construction, erection or fabrication of the structure described in the Declarations.
2. "Soft Costs" means additional:
 - a. Interest expense on money you borrow to finance construction or reconstruction;
 - b. Real estate or property taxes;
 - c. Advertising and promotional expense;
 - d. Insurance expenses;
 - e. Commissions, legal and accounting costs and fees and administrative expenses incurred as a result of a necessary renegotiating of a lease or leases;
 - f. Architectural fees, building inspection and permit fees and charges;
 - g. Storage charges; and
 - h. Survey costs.

Coverage is provided if shown in the above schedule.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.