

## CRAFTS / 12 PAK SUPPLEMENT

**General Information:**

Insured: \_\_\_\_\_ Agent: \_\_\_\_\_  
 Type of Contractor: \_\_\_\_\_  
 Contractor's License Held: \_\_\_\_\_ If so, License # \_\_\_\_\_  
 Years in Business for this specific named entity \_\_\_\_\_ Years Experience in field \_\_\_\_\_  
 Date of DBA or Corporate Filing \_\_\_\_\_

Percentage of work performed	Residential _____%	Commercial _____% (Total = 100%)
	Interior _____%	Exterior _____% (Total = 100%)
	New Const _____%	Repair/Remodel _____% (Total = 100%)

Number of Owners/Partners/Officers \_\_\_\_\_ Full Time Employees \_\_\_\_\_ Part Time Employee's \_\_\_\_\_

Indicate percentage of work subbed out % \_\_\_\_\_ Total Cost \$ \_\_\_\_\_

Do you require all subcontractors to name you as an additional insured on their general liability policy? Yes      No

Do you require certificates of insurance evidencing a minimum of \$500,000 of general liability insurance from subcontractors? Yes      No

Describe the type of work that is subcontracted out: \_\_\_\_\_

Specific types of work subbed out:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List all types of work performed and percentage of each:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**List 2 most recent jobs performed:**

Location	\$ Receipts	Type of work done	Start Date	End Date

Maximum # stories worked on \_\_\_\_\_ Is scaffolding Used? \_\_\_\_\_ If yes, is it left on site for others use? \_\_\_\_\_

Any work done below grade? \_\_\_\_\_ Maximum Depth \_\_\_\_\_

Does applicant draw plans, designs or specifications for others? \_\_\_\_\_

Any demolition or wrecking work done? \_\_\_\_\_

Use or ownership of cranes or heavy machinery? \_\_\_\_\_ If yes, describe \_\_\_\_\_

Snow Plowing

1. Any snow plowing/removal or sanding of commercial establishments including malls/shopping centers, strip malls, office complexes or other retail operations? Yes \_\_\_\_\_ No \_\_\_\_\_

Landscaping

1. Any grading of land or excavation work performed? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Any spraying of pesticides, herbicides or fertilizers? Yes \_\_\_\_\_ No \_\_\_\_\_  
If "YES", how often and what is used? \_\_\_\_\_

3. Any tree trimming/removal work performed? Yes \_\_\_\_\_ No \_\_\_\_\_

4. Please describe all work being performed during the "off season" months.  
\_\_\_\_\_  
\_\_\_\_\_

Carpentry

1. % if total sales derived from new construction/structural framing \_\_\_\_\_%

2. Any shop work done? \_\_\_\_\_ % \_\_\_\_\_ Dust Collection System? \_\_\_\_\_ UL Approved Spray Booth? \_\_\_\_\_

3. Any gutting of interior load bearing walls? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, % \_\_\_\_\_

4. Any excavation being performed? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, % \_\_\_\_\_

5. Any refinishing, sanding, stripping or buffing of floors? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, % \_\_\_\_\_  
Is polyurethane used? Yes \_\_\_\_\_ No \_\_\_\_\_ Water or oil based? Yes \_\_\_\_\_ No \_\_\_\_\_

Electrical

1. Any high voltage overhead wiring done? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Any underground cable work done? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Any installation of burglar or fire alarm system? Yes \_\_\_\_\_ No \_\_\_\_\_

If "YES", what %? \_\_\_\_\_ Any Monitoring of Systems? Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing

1. Any boiler service, installation or repair? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Any work on Sewer lines, septic tanks or water mains? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Any work done on LPG or natural gas lines? Yes \_\_\_\_\_ No \_\_\_\_\_

Masonry

1. Any Municipal, Retail or Commercial work done? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Any work done on Foundations, slabs, monolithic floors, Footings or load Bearing Walls? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Any work done on retaining walls? Yes \_\_\_\_\_ No \_\_\_\_\_

Painting

1. Interior% \_\_\_\_\_ Exterior% \_\_\_\_\_

2. Any exterior spray painting applications? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Any lead paint removal done? Yes \_\_\_\_\_ No \_\_\_\_\_

4. Exterior painting, any use of scaffolding? Yes \_\_\_\_\_ No \_\_\_\_\_

Anything over two stories tall? Yes \_\_\_\_\_ No \_\_\_\_\_

Janitorial

- 1. Any Snow Plowing, removal or salting/sanding operations? Yes \_\_\_\_\_ No \_\_\_\_\_
- 2. Any Stripping, waxing or buffing of floors? Yes \_\_\_\_\_ No \_\_\_\_\_
- 3. Any cleaning of commercial buildings or Retail operations such as food markets, drug stores or department stores? Yes \_\_\_\_\_ No \_\_\_\_\_

Please explain all 'yes' answers below:

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General Information (Required)

- Do you use standard construction industry contracts for all work? Yes No
- Do you hold a general contractor's license or act in the capacity of a general contractor? Yes No
- Do you rent, lease or lend tools and/or equipment (with or without operator) including scaffolding to others? Yes No
- Do you engage in or subcontract demolition or blasting operations? Yes No
- Does any exterior work involve more than a two story building? Yes No
- Have you been involved in operations including lead paint or asbestos removal or abatement? Yes No
- Do you now or have you in the past done any work in connection with EIFS (Exterior, Insulation and Finish systems)? Yes No
- In the past five years, have you had any chemical spills or releases which required reporting to the Department of Environmental Protection (DEP) or the federal EPA? Yes No

Do you perform now or have you performed in the past any of the following operations? If yes, please explain in the Comments Section.

- Sales or installation of fertilizers, pesticides or other chemicals? Yes No
- Sales, service or installation of alarm systems or fire suppression systems? Yes No
- Sales, service or installation of any equipment using LPG as an energy source? Yes No
- Installation of guard rails or other roadway protective walls or devices? Yes No

