



Date:

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**BUILDERS RISK SUPPLEMENTAL APPLICATION**

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Name and address of Insured

Name:

Address:

Name and address of Producer:

Applicant is: ☐ Individual ☐ Partnership ☐ Corporation ☐ Joint Venture  
☐ Other

Interest of applicant: ☐ Owner ☐ Contractor ☐ Other:

Name and address of Mortgagee:

Policy term: From: To:

Deductible:

☐ \$2,500 ☐ \$5,000 ☐ \$10,000 ☐ Other:

Description of project:

Location of project:

Inspection contact name and phone number:

Contractor name and address:

Has Contractor completed this type of project before? ☐ Yes ☐ No

How many years in business?

**Limits of Insurance:**

1. \$\_\_\_\_\_ At the project site
2. \$\_\_\_\_\_ In temporary storage at any other location
3. \$\_\_\_\_\_ While in transit
4. \$\_\_\_\_\_ Other:
5. \$\_\_\_\_\_ For all covered property

Flood limit requested: \$ \_\_\_\_\_ Deductible: \$ \_\_\_\_\_ Flood Zone \_\_\_\_\_

Earthquake limit requested: \$ \_\_\_\_\_ Deductible: \$ \_\_\_\_\_

**Soft Costs** (Extra Expense and Rental Income) Is Soft Cost Coverage desired? ☐ Yes ☐ No

If 'yes', provide the following information:

Extra Expense:	Annual or Full Dollar Amount
Construction Loan Interest	\$ _____
Real Estate and Property Taxes	\$ _____
Architect, Engineering and Consultant Fees	\$ _____
Legal and Accounting Fees	\$ _____
Builder's Risk Insurance Premium Charge	\$ _____
Advertising and Promotional Expenses	\$ _____
Other - describe _____	\$ _____
Total Extra Expense Values	\$ _____
Rental Income - Total Rental Income Values	\$ _____

Limit of Insurance Requested for:

Extra Expense:	\$ _____
Rental Income:	\$ _____

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**Construction:**

☐ Frame ☐ Joisted Masonry ☐ Non-Combustible  
☐ Masonry Non-Combustible ☐ Modified Fire Resistive/Fire Resistive

Completed Value: \$ \_\_\_\_\_

Total Square Footage: \_\_\_\_\_ Number of Floors: \_\_\_\_\_

Intended Occupancy when completed: \_\_\_\_\_

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**Protection:**

Distance to operating fire hydrant: \_\_\_\_\_ Fire Department: ☐ Paid ☐ Volunteer

Will the project be equipped with working standpipes? ☐ Yes ☐ No

Public fire protection at the job site:

Will Temporary heating be used? ☐ Yes ☐ No

Will the project site be fenced? ☐ Yes ☐ No

Will the project site be locked? ☐ Yes ☐ No

Will the project site be lighted? ☐ Yes ☐ No

Will there be a watchman on premises during non-working hours ☐ Yes ☐ No

Insured Signature \_\_\_\_\_

Date \_\_\_\_\_

