

Application

CONTRACTORS POLLUTION LIABILITY POLLUTION ERRORS & OMISSIONS LIABILITY / CONTRACTORS OPERATIONS & PROFESSIONAL SERVICES



EIL-COPS

NOTICE: CERTAIN POLICIES PROVIDE CLAIMS MADE COVERAGE. PLEASE READ CAREFULLY.

NOTICE: THE E&O, CPL AND COPS POLICIES PROVIDE THAT THE LIMIT OF LIABILITY AVAILABLE TO PAY SETTLEMENTS OR CLEANUP COSTS SHALL BE REDUCED BY AMOUNTS INCURRED FOR LEGAL DEFENSE. FURTHER NOTE THAT AMOUNTS INCURRED FOR LEGAL DEFENSE SHALL BE APPLIED AGAINST THE DEDUCTIBLE AMOUNT.

INSTRUCTIONS

1. PLEASE COMPLETE THIS APPLICATION. ALL QUESTIONS APPLICABLE TO EACH COVERAGE APPLIED FOR MUST BE ANSWERED.
2. IF SPACE IS INSUFFICIENT TO COMPLETE ANSWERS, PLEASE CONTINUE ON YOUR FIRM'S LETTERHEAD.
3. HAVE THIS FORM SIGNED AND DATED BY AN OWNER, PARTNER OR DIRECTOR/OFFICER OF YOUR FIRM.
4. SEE PAGES 6 & 7 FOR LIST(S) OF REQUIRED SUBMISSION INFORMATION.

APPLICANT

1. NAME: _____

POST OFFICE ADDRESS: _____

ADDRESS: _____

PHONE NUMBER: _____

2. ADDRESS OF HEADQUARTERS: _____

TELEPHONE NUMBER OF HEADQUARTERS: _____

CONTACT AND TITLE: _____

3. ATTACH A LIST OF PROPOSED NAMED INSURED(S) TO BE COVERED BY THIS POLICY (ONLY THOSE ENTITIES PERFORMING THE SERVICES AND/OR OPERATIONS AS PROPOSED WILL BE DESIGNATED AS NAMED INSURED(S)).

4. CHECK COVERAGE(S) YOU ARE APPLYING FOR: [NOTE: EITHER A. ((1) AND/OR (2)), OR B. MAY BE CHECKED, BUT NOT BOTH A. AND B.)

A (1) ERRORS & OMISSIONS LIABILITY (E&O)

LIMIT OF LIABILITY: _____

SIR/DEDUCTIBLE: _____

PROPOSED EFFECTIVE DATE: _____

(2) CONTRACTOR'S POLLUTION LIABILITY (CPL) / CONTRACTOR'S POLLUTION OCCURRENCE (CPO)

LIMIT OF LIABILITY: _____

SIR/DEDUCTIBLE: _____

PROPOSED EFFECTIVE DATE: _____

CPL Coverage is either claims-made or occurrence

B CONTRACTOR'S OPERATIONS AND PROFESSIONAL SERVICES (COPS)

LIMIT OF LIABILITY: _____

SIR/DEDUCTIBLE: _____

PROPOSED EFFECTIVE DATE: _____

5. HOW LONG HAS THE NAMED INSURED BEEN IN BUSINESS? _____

6. DURING THE PAST FIVE YEARS HAS THE NAME OF THE APPLICANT BEEN CHANGED OR HAS ANY OTHER BUSINESS BEEN PURCHASED OR HAVE ANY MERGERS OR CONSOLIDATIONS TAKEN PLACE (PLEASE CHECK): YES NO

If yes, give full details: _____

7. TOTAL PROFESSIONAL STAFF PERSONNEL OF APPLICANT

(1) PRINCIPALS: _____

(2) SUPERVISORS/FOREMEN: _____

(3) TOTAL NUMBER OF ENGINEERS & ARCHITECTS: _____

(4) TOTAL NUMBER OF FIELD PERSONNEL: _____

(5) HYDROGEOLOGISTS, GEOLOGISTS, CHEMISTS: _____

(6) ALL OTHER (DESCRIBE): _____

8. ARE ANY JOINT VENTURES BEING PROPOSED FOR COVERAGE UNDER THIS POLICY? YES [] NO []

If yes, please describe _____

9. ARE YOUR PROJECTS BONDED? YES [] NO []

If yes with what company? _____

10. DOES ANY ONE PROJECT OR CONTRACT REPRESENT MORE THAN 25% OF ANNUAL FEES? PLEASE CHECK: YES [] NO []

If yes, give full details _____

11. PLEASE PROVIDE PRIOR YEAR'S TOTAL GROSS REVENUE: _____

12. PROFILE OF OPERATIONS

- (1) IN COLUMN A, PLEASE PROVIDE % OF FIRM'S SALES PERFORMED BY IN HOUSE OPERATIONS AND SERVICES.
- (2) IN COLUMN B, PLEASE PROVIDE % OF FIRM'S SALES IN SUBCONTRACTED OPERATIONS AND SERVICES.
- (3) COLUMNS A+B SHOULD EQUAL 100%.
- (4) PROJECTED SALES = 12 MONTHS FROM ANTICIPATED DATE OF COVERAGE FOR OPERATIONS AND SERVICES.

CATEGORY A. E&O	A + ----- % In House	B=100% ----- % Sub-Contracted Out	C Projected \$\$ Sales
1. Environmental			
Remedial Investigations			
Work on feasibility studies, reports, surveys where applicant is not involved in design			
Remedial Design plans and specifications			
Observation / Inspection of construction on behalf of client			
Construction management/Project Management; include supervision/oversight activities			
Real Estate Audits			
Soil Testing/Analysis			
Lab Testing/analysis			
Asbestos/Lead abatement design/sampling verification			
Environmental Risk Assessments/audits			
Regulatory Consulting/Permitting			
Tank Testing & maintenance			
Decommissioning and Demolition			
Waste brokering/recommendations/arrangements/management of disposal (Do not include transportation/disposal fees in this category)			
Health & Safety Training			
Other (explain)			
2. Non Environmental			
Work on feasibility studies, reports surveys where applicant is not involved in design			
Construction/Project Management/Observation/Inspection			

Surveying			
Design other than listed in Section 1, above or Section 3. below			
Design of waste water/sewer systems (process)			
Other Process/Engineering			
Geotechnical/Foundations/Soils Engineering			
HVAC/Electrical/Mechanical Engineering			
Lab Testing			
Other (explain)			
3. Combined Environmental and Non Environmental			
Product Design (Products for sale)			
Computer Software Design/ Programming			
Financial management/Consulting			
Other (explain)			

TOTAL PROJECTED SALES FOR CATEGORY A

Do not include revenue generated from Project Management/Construction Management in any CPL category below. All Project management revenues are to be included ONLY within the E&O categories in A 1& 2 above.

CATEGORY B. CPL	A +	B=100%	C
1. Remedial Action Contracting	% In House	% Sub-Contracted Out	Projected \$\$ Sales
Groundwater Sampling			
Soil Sampling			
Haz material clean-up, soil excavation			
Groundwater Treatment & Recovery			
Waste Storage			
On-site haz waste treatment			
Mobile Incinerators			
Barrier/Liner Contractors			
Emergency Haz Material Clean-Up			
PCB Oil/Equipment Retrofill & removal			
Hydrocarbon or Chemical Recycling / Recovery			
Dredging			
Asbestos/Lead Abatement			
Other (explain)			
2. Non-Environmental Contracting			
Carpentry			
Demolition/Dismantling			
Drilling			
Electrical			
Excavation (Non Haz)/Grading			
General Contracting			
HVAC/Mechanical			

Industrial Cleaners (incl. Sewer/Septic)			
Insulation			
Logging			
Masonry/Concrete			
Marine			
Oil Lease			
Painting			
Pipeline Construction/Cleaners			
Plumbing			
Roofing			
Steel Erection			
Street and Road Construction			
Other (explain)			

TOTAL PROJECTED SALES FOR CATEGORY B _____

TOTAL CATEGORYS A & B PROJECTED SALES _____

13. DETAIL FOREIGN OPERATIONS (I.E. COUNTRY(IES)) WHERE OPERATIONS NORMALLY OCCUR. INDICATE PERCENTAGE RELATIVE TO TOTAL PROJECTED SALES UNDER QUESTION 12.

14. DOES YOUR COMPANY SELECT OR ARRANGE FOR THE SITE OF DISPOSAL FOR HAZARDOUS OR NON HAZARDOUS WASTE ON BEHALF OF CLIENTS? YES [] NO []
15. DOES YOUR COMPANY OWN, OPERATE OR LEASE LICENSED WASTE TREATMENT, STORAGE OR DISPOSAL FACILITIES? YES [] NO []
16. ARE UPDATED CERTIFICATES OF INSURANCE FROM SUBCONTRACTORS KEPT ON FILE? YES [] NO []
17. ARE THESE CERTIFICATES REQUIRED TO SHOW ENVIRONMENT LIABILITY INSURANCE? YES [] NO []
18. WHAT ARE THE MINIMUM LIMITS OF LIABILITY YOU REQUIRE FOR YOUR SUBCONTRACTORS?

GENERAL LIABILITY: _____

ENVIRONMENTAL LIABILITY: _____

PROFESSIONAL LIABILITY: _____

19. DO YOU REQUIRE SUBCONTRACTORS POLICIES TO NAME YOU AS AN ADDITIONAL INSURED? YES [] NO []
20. DO YOUR CONTRACTS WITH SUBCONTRACTORS CONTAIN AN INDEMNIFICATION PROVISION?
If yes, attach copies of all insurance requirements and indemnification clauses. YES [] NO []
21. DOES YOUR COMPANY ENTER INTO WRITTEN CONTRACTS WHERE YOU ASSUME LIABILITY?
If yes, attach copies of all insurance requirements and indemnification clauses. YES [] NO []

22. PLEASE LIST YOUR CURRENT LIABILITY COVERAGE INFORMATION.

COVERAGE	CARRIER	LIMITS	EXPIRATION	SIR	RETRODATE, IF ANY
General Liability					
Contractors Poll, Liability					
Worker's Comp.					
Umbrella					
Auto Liability					
Errors & Omissions					

THE FOLLOWING TWO QUESTIONS MUST BE ANSWERED FOR ALL COVERAGES.

23. HAVE ANY CLAIMS BEEN PREVIOUSLY MADE AGAINST THE APPLICANT OR REPORTED UNDER ANY OTHER CONTRACTOR'S POLLUTION OR PROFESSIONAL LIABILITY POLICIES? YES [] NO []

IF YES, STATE 1) THE DATE WHEN CLAIM WAS MADE; 2) THE DATE THE INCIDENT, ACT OR OMISSION GIVING RISE TO THE CLAIM TOOK PLACE;
3) NAME OF THE CLAIMANT; 4) NATURE OF THE CLAIM; 5) AMOUNT PAID OR ESTIMATED MAY BE PAID; AND 6) FINAL DISPOSITION OR CURRENT STATUS.

IT IS AGREED THAT CLAIMS MADE PRIOR TO THE INCEPTION OF THE POLICY PERIOD ARE EXCLUDED FROM THIS PROPOSED COVERAGE, UNLESS EXPRESSLY PROVIDED OTHERWISE IN THE POLICY OR BY ENDORSEMENT. (PLEASE INITIAL) YES _____

24. IS THE APPLICANT AWARE OF ANY FACT, CIRCUMSTANCE OR SITUATION WHICH COULD RESULT IN A CLAIM BEING MADE AGAINST IT OR ANY OTHER PERSON OR ENTITY FOR WHOM COVERAGE WILL BE SOUGHT? YES [] NO []

If, yes, give full details _____

IT IS AGREED THAT IF SUCH KNOWLEDGE EXISTS, ANY CLAIM ARISING FROM SUCH FACT, CIRCUMSTANCE OR SITUATION IS EXCLUDED FROM THIS PROPOSED COVERAGE UNLESS EXPRESSLY PROVIDED OTHERWISE IN THE POLICY OR BY ENDORSEMENT. (PLEASE INITIAL) YES _____

25. SUBMISSION REQUIREMENTS

A. THE FOLLOWING INFORMATION IS REQUIRED FOR ALL POLICIES: CPL, E&O, COPS

- [] BROCHURE/STATEMENT OF QUALIFICATION
[] RESUMES OF KEY PERSONNEL INCLUDING ALL PROJECT MANAGERS
[] HARD COPY OF LOSS RUNS APPLICABLE TO THESE COVERAGES INCLUDING POLLUTION LOSS INFORMATION.
[] AUDITED FINANCIAL STATEMENTS (LAST 2 YEARS) AND CURRENT INTERIM FINANCIAL (MAY BE UNAUDITED)

B. THE FOLLOWING INFORMATION IS REQUIRED FOR E&O COVERAGE AND COPS COVERAGE (IN ADDITION TO THE INFORMATION REQUIRED IN A.)

- [] SAMPLE CLIENT AND SUBCONTRACTOR CONTRACT FORMS
[] QUALITY ASSURANCE/QUALITY CONTROL (QA/QC) PLANS
[] SF 254 OR 10 LARGEST PROJECTS LIST.

IF PROJECT POLICY, ALSO INCLUDE COPY OF FULLY EXECUTED CONTRACT WITH CLIENT.

THE APPLICANT REPRESENTS THAT THE ABOVE STATEMENTS AND FACTS ARE TRUE AND THAT NO MATERIAL FACTS HAVE BEEN SUPPRESSED OR MISSTATED.

COMPLETION OF THIS FORM DOES NOT BIND COVERAGE. APPLICANT'S ACCEPTANCE OF COMPANY'S QUOTATION AND COMPANY'S WRITTEN AGREEMENT TO BE BOUND IS REQUIRED TO BIND COVERAGE AND TO ISSUE POLICY. IT IS AGREED THAT THIS FORM SHALL BE THE BASIS OF THE CONTRACT SHOULD A POLICY BE ISSUED, AND WILL BE ATTACHED TO THE POLICY.

ALL WRITTEN STATEMENTS AND MATERIALS FURNISHED TO THE COMPANY IN CONJUNCTION WITH THIS APPLICATION ARE HEREBY INCORPORATED BY REFERENCE INTO THIS APPLICATION AND MADE APART HEREOF.

IF AN ORDER IS RECEIVED, THE APPLICATION IS ATTACHED TO THE POLICY SO IT IS NECESSARY THAT ALL QUESTIONS BE ANSWERED IN DETAIL.

NOTICE: ANY PERSON WHO KNOWINGLY AND WITH THE INTENT TO DEFRAUD PROVIDES FALSE INFORMATION IN AN INSURANCE APPLICATION, OR PRESENTS, ASSISTS, OR MAKES A FRAUDULENT CLAIM FOR THE PAYMENT OF A LOSS OR OTHER BENEFIT, OR PRESENTS MORE THAN ONE CLAIM FOR THE SAME INCIDENT OF DAMAGE OR LOSS, WILL COMMIT A FELONY AND IF CONVICTED WILL BE SENTENCED FOR EACH VIOLATION WITH A FINE OF NO LESS THAN FIVE THOUSAND (\$5,000) DOLLARS AND NOT EXCEEDING TEN THOUSAND (\$10,000) DOLLARS, OR BE SENTENCED TO IMPRISONMENT FOR A THREE (3) YEAR TERM, OR BOTH PENALTIES. IN THE EVENT OF AGGRAVATING CIRCUMSTANCES, THE TERM COULD BE INCREASED TO A MAXIMUM OF FIVE (5) YEARS; IN THE EVENT OF INTERVENING EXTENUATING CIRCUMSTANCES IT COULD BE REDUCED UP TO A MINIMUM OF TWO (2) YEARS.

APPLICANT: _____ DATE _____
(signature of officer of corporation)

APPLICANT: _____
(print name & title)

BROKER: _____ DATE _____
(print name of firm)
(address of brokerage firm)
(contact person & telephone number)

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY AND SIGN BELOW WHERE INDICATED. IF A POLICY IS ISSUED THIS SIGNED STATEMENT WILL BE ATTACHED TO THE POLICY.

THE INSURED HEREBY ACKNOWLEDGES THAT HE/SHE/IT IS AWARE THAT THE LIMIT OF LIABILITY CONTAINED IN THE E&O, CPL OR COPS POLICY SHALL BE REDUCED, AND MAY BE COMPLETELY EXHAUSTED, BY THE COSTS OF LEGAL DEFENSE AND, IN SUCH EVENT, THE COMPANY SHALL NOT BE LIABLE FOR THE COSTS OF LEGAL DEFENSE OR FOR THE AMOUNT OF ANY JUDGMENT OR SETTLEMENT OR CLEANUP COSTS TO THE EXTENT THAT SUCH EXCEEDS THE LIMIT OF LIABILITY OF THIS POLICY.

THE INSURED HEREBY FURTHER ACKNOWLEDGES THAT HE/SHE/IT IS AWARE THAT LEGAL DEFENSE COSTS THAT ARE INCURRED SHALL BE APPLIED AGAINST THE DEDUCTIBLE AMOUNT.

SIGNED: _____ DATE _____
(signature of officer of corporation)
(print name and title)