



LIONS GATE UNDERWRITING

CONTRACTORS LIABILITY APPLICATION

I. General Information

Named Insured (*Full Legal Name*): _____

Mailing Address: _____

City: _____ Province/Territory: _____ Postal Code: _____

Risk Location address: _____

City: _____ Province/Territory: _____ Postal Code: _____

Name of Principal(s): _____

Website Address (*if applicable*): _____

Previous Insurer: _____

Expiring Premium and Date: _____

Has any Insurer cancelled, declined, or refused you coverage? (*If 'yes', please provide details below*) Yes No

Have there been any insured or uninsured losses in the past 5 years? Yes No

If 'yes', please provide details below.

DATE	DESCRIBE LOSS AND PRECAUTION TAKEN SINCE	RESERVE OR PAID OUT AMOUNT

II. General Liability Underwriting Information

Year Business Established: _____

Experience of Principals (years): _____

Number of Employees: *Full Time*: _____ *Part Time*: _____

Estimated Gross Revenue: \$ _____

Sales: Canadian Sales %: _____ US Sales %: _____

If there are operations outside of Canada, please provide details:

Description of Operations:

% Residential: _____ % Commercial: _____ % Industrial: _____

Operations: Please indicate % of operation the applicant provides. The total must add up to 100%

Acoustic Ceilings	____%	Highway Street and Road Construction, Reconstruction and Repair	____%
Air Conditioning including heat pumps	____%	House Furnishings Installation	____%
Alarm Installation	____%	HVAC	____%
Building Construction	____%	Insulation	____%
Building Construction under wrap up	____%	Iron or Steel Erection—Structural	____%
Carpentry:	____%	Iron or Steel Erection—Other	____%
Cleaning Building Exterior	____%	Irrigation and Drainage System Construction	____%
Cleaning Sewers and Drains	____%	Landscaping	____%
Cleaning Streets excluding Snow Removal	____%	Logging	____%
Cleaning Windows	____%	Machinery Repair—Agriculture	____%
Cleaning Building Interior	____%	Masonry—Including Bricklaying, Stonework, Exterior Stucco and Marble	____%
Concrete Pre-Cast Beams and Supports	____%	Metal Doors, Window and Awning Installation	____%
Concrete Work, Other	____%	Millwright	____%
Describe:			
Consultant (No Manual Work) -	____%	Painting—Non-Spraying	____%
Describe:			
Demolition (by hand and equipment only)	____%	Painting—Interior Spraying	____%

Directional Drilling (no oilfield)	___%	Painting—Exterior Spraying	___%
Drilling (Water)	___%	Plastering and Lathing	___%
Driveway and Parking Constructions:	___%	Project Manager	___%
Drywall	___%	Property Manager—Basic Building Maintenance	___%
Electrical	___%	Refrigeration	___%
Elevator Installation	___%	Remediation Contractors	___%
Entertainment Installation & Repair—Commercial	___%	Septic Tank Installation, Service and Repair	___%
Entertainment/ Computer/ Appliance Installation & Repair— Residential	___%	Sheet Metal (Not Roofing)	___%
Equipment Rental Service	___%	Sign Installation	___%
Excavation-Site Service, Pure Grading	___%	Small Garage, Repair or Mechanic Shop	___%
Excavation—Sewer, Stream Main and Water Main Construction	___%	Swimming Pools—Above Ground, Outdoor Only	___%
Fence Construction	___%	Traffic Control/ Flagger	___%
Floor Covering Installation	___%	Terrazzo and Tile Work	___%
Glass Installation	___%	Underground Cable or Conduit	___%
Glazier—No installation	___%	Underpinning of Building/Shoring	___%
Grading of Land—No Excavation or Road Construction	___%	Upholstery	___%
Hauling Equipment—Non-Hazardous Material Only	___%	Waste Removal/ Junk Removal	___%
Heating Contractor including Gas Hook Ups	___%	Waterproofing	___%
Heavy Equipment/ Crane/ Life Operators	___%	Welding Contractor (Excluding Oilfield)	___%

Does the applicant subcontract work to others:

If 'yes', what percentage ___% and please describe sub-contracting operations:

Do the applicant assume liability under any hold harmless agreements of contracts?

If 'yes', please explain:

Does the applicant rent or lease equipment to others?

If 'yes', please explain:

Do you ever (re)manufacture products?

If 'yes', please describe and advise the _____% of gross receipts from product:

Please list and describe 3 of the most recent, largest contracts completed, include contract price:

Name of Client	Nature of Work	Annual Contract Income	Duration

III. Coverage Requirements

Premises Liability: \$1,000,000 \$2,000,000 \$3,000,000 \$4,000,000 \$5,000,000
Deductible: \$1,000 \$2,500 \$5,000

Supplemental Application—Property Coverage

Risk Address: _____

City: _____ Province/Territory: _____ Postal Code: _____

Year Built: _____

Number of Storeys: _____

Construction: _____

Total Area Occupied: _____

Year Building Updated: _____ Roof: _____ Electrical System: _____ Plumbing: _____ Heating: _____

Burglar Alarm: Monitored Local None

Video Surveillance: Yes No

Fire Alarmed: Monitored Local None

Sprinklered: Yes No

Have there been any insured or uninsured losses in the past 5 years? Yes No

If 'yes', please provide details below:

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Coverage Limits

Building	\$ _____	Tenant's Improvements	\$ _____
Equipment	\$ _____	Stock	\$ _____
Profits (12 Month Indemnity Period)	\$ _____	Miscellaneous Property Floater	\$ _____
Tool Floater (ACV)	\$ _____	Installation Floater	\$ _____
Contractors Equipment	\$ _____		

Contractors Equipment Schedule

Year, Make, Model, Serial Number	Limit
	\$
	\$
	\$

FULL DISCLOSURE

I, the Applicant, and the Insured if the Insurer has requested information from it, have reviewed all parts of and attachments to this application and declare that all of the information is true and correct even if the information has been entered or suggested by the representative of the Insurer or by the insurance broker. I understand that acceptance of this application for insurance is based on the truth and completeness of this information, and that if I falsely describe the property to the prejudice of the Insurer, or misrepresent or fraudulently omit to communicate any circumstance that is material to be made known to the Insurer in order to enable it to judge of the risk to be undertaken, the contract may be void in whole or as to any property in relation to which the misrepresentation or omission is material.

Any fraud or willfully false statement in a statutory declaration in relation to any of the particulars required by applicable conditions, statutory or otherwise, to be specified in relation to a claim, vitiates the claim of the person making the declaration.

PERSONAL INFORMATION CONSENT

I am providing personal information of individuals in this form to apply for insurance. The personal information collected will be used for the purpose of this application or any renewal or change in coverage. I consent and authorize my broker, agent or insurer to the following:

- i. To collect, use and disclose personal information on this form to, from and between insurers and other appropriate parties, subject to my broker's, agent's and the insurer's policy regarding personal information. Such personal information will include policy history, loss history and rating information.
- ii. That these collections, uses and disclosures are for the purposes necessary to communicate with me and the listed applicants, assess, manage and underwrite risk, determine a premium, determine eligibility and conditions for a premium payment plan, investigate and settle claims, analyze business results, detect and prevent fraud, as permitted by law.

I declare that all individuals whose personal information is contained in this form have authorized me to consent to i) and ii) above on their behalf.

I may obtain a copy of or ask questions about my broker's, agent's or insurer's personal information policies by contacting their Chief Compliance Officer.

Applicant's Signature: _____ Title: _____

(Principal, Partner or Officer)

Print Name: _____ Date: _____

If your province/territory requires a countersignature from your authorized retail agent or broker, please provide below.

Broker Signature: _____ Date: _____