

General liability application for Contractor risks



DBA:		Owner:	
Email:		Company type	<input type="checkbox"/> Sole <input type="checkbox"/> Corp <input type="checkbox"/> LLC
Cell:		Active owners	:
Mailing:		CSLB license number	:
City & zip:		License class	:
Website:		EIN:	
Current carrier:		Expires	:
Claim last 5 years	<input type="checkbox"/> No <input type="checkbox"/> Yes	Years in business:	:
Today's date	:	Source:	SP code:
Underwriting info			
Estimated gross receipts next 12 months		\$	
Estimated employee field payroll next 12 months		\$	
Estimated subcontractor costs next 12 months		\$	
New ground up custom home construction		<input type="checkbox"/> No <input type="checkbox"/> Yes	# of custom homes:
New ground up tract home construction		<input type="checkbox"/> No <input type="checkbox"/> Yes	# of tract homes:
Residential work	:	% Commercial work	:
			= 100%
New ground up construction	:	% Non-structural remodel work	:
Structural remodel work	:	% Service and repair work	:
			= 100%
Narrative of operations			

The insured affirms and certifies the above is true and correct to the best of their knowledge: