



## PLUMBING, HEATING AND AIR CONDITIONING CONTRACTOR'S QUESTIONNAIRE

Date

Producer:		Insured Name and Mailing Address:		
Code	Subcode	Website Address		
		Effective Date	Expiration Date	Policy/Account Number

YES NO

1. Years in business? \_\_\_\_\_
2. If new venture, years in trade? \_\_\_\_\_
3. States operating in? \_\_\_\_\_

☐ ☐ Multiple Named Insured's? If multiple Named Insured's, explain operations for each:

4. Provide a detailed description of all operations, if applicable:

**Section I** – Please complete all Section I questions. If any question is answered “yes”, please contact an Underwriter prior to proceeding.

- ☐ ☐ 1. Do you work on fire suppression systems such as installing or servicing fire sprinklers?
- ☐ ☐ 2. Do you perform any work repairing or installing gas lines?
- ☐ ☐ 3. Do you, or have you, performed any work on new condominiums, townhouses, or tract homes? If yes, answer **Section II, 3** below.
- ☐ ☐ 4. Do you work on process piping for medical, food, petroleum chemical, automotive, steel mills, paper mills or heat exchangers or any other industry.
- ☐ ☐ 5. Do you work on warehouse refrigeration systems?
- ☐ ☐ 6. Do you work on fuel tanks?
- ☐ ☐ 7. Has there been more than one property water damage claim in the last 3 years?

### **Section II – Operations**

Annual payroll \$ \_\_\_\_\_

Annual receipts \$ \_\_\_\_\_

Annual subcontracted costs \$ \_\_\_\_\_

YES NO

- ☐ ☐ Written agreement with all subcontractors?
- ☐ ☐ Do you have a formal recordkeeping procedure to maintain copies of all contracts and certificates of insurance for at least the statute of repose?

***If more than \$200,000 in annual subcontracted costs, please submit a copy of subcontractor agreement.***

**Acting as General Contractor**

New \_\_\_\_\_ % Service, Repair, Remodel \_\_\_\_\_ %

**Subcontractor working for GC**

New \_\_\_\_\_ % Service, Repair, Remodel \_\_\_\_\_ %

**Trade Contractor working directly for customer**

New \_\_\_\_\_ % Service, Repair, Remodel \_\_\_\_\_ %

- ☐ ☐ 1. Any OSHA violations in the last 3 years? If yes, describe: \_\_\_\_\_
- ☐ ☐ 2. Any work within a Wrap-Up or OCP project? If yes, describe: \_\_\_\_\_
3. For any work on condominiums, townhouses, tract homes or multi-family dwellings, please answer the following questions:  
How many new construction jobs are done annually? \_\_\_\_\_  
List the cities where the job(s) are located: \_\_\_\_\_
4. Percent of work performed:
- |                        |         |               |         |
|------------------------|---------|---------------|---------|
| New Construction       | _____ % | Commercial    | _____ % |
| Alterations/Remodeling | _____ % | Residential   | _____ % |
| Service/Repair         | _____ % | Industrial    | _____ % |
| Maintenance            | _____ % | Institutional | _____ % |
| Total                  | _____ % | Total         | _____ % |
- ☐ ☐ 5. Any work at heights greater than 3 stories?
- ☐ ☐ 6. Any work in high-rise apartments or condos?
- ☐ ☐ 7. Do you rent, lease or loan equipment to others? If yes, describe: \_\_\_\_\_

8. **Inland Marine**

- ☐ ☐ a. Is your equipment provided with theft deterrent devices?
- ☐ ☐ b. How is your equipment and materials secured at the jobsite? \_\_\_\_\_

9. **Auto Exposures**

Fleet Safety and Maintenance Program	<input type="checkbox"/>	MVR ordered at hire/annual	<input type="checkbox"/>
Distracted Driving Policy	<input type="checkbox"/>	Telematics	<input type="checkbox"/>
MVR Driver Acceptability Criteria	<input type="checkbox"/>	Vehicle Personal Use Policy	<input type="checkbox"/>

- ☐ ☐ Any hauling for others?
- How many drivers have a CDL? \_\_\_\_\_



YES NO

10. **Workers' Compensation**

What is the annual turnover? \_\_\_\_\_ %

☐ ☐

Do you have a formal Safety program in place?

☐ ☐

Do you enforce the use of personal protective equipment?

☐ ☐

Do you have a return-to-work program?

11. **Plumbing Services Offered**

\_\_\_\_\_ % General water lines

\_\_\_\_\_ % Geothermal

\_\_\_\_\_ % Process Piping – list industries served: \_\_\_\_\_

\_\_\_\_\_ % Commercial cooking suppression systems (ANSUL)

\_\_\_\_\_ % LPG Work

\_\_\_\_\_ % Lawn sprinkler

\_\_\_\_\_ % Fire Suppression – list type of systems installed: \_\_\_\_\_

\_\_\_\_\_ % Gas fireplace/pellet stove installation

\_\_\_\_\_ % Clearing of waste lines

\_\_\_\_\_ % Connections of residential/commercial plumbing systems to water mains

\_\_\_\_\_ % Other – Describe: \_\_\_\_\_

\_\_\_\_\_ % Total = 100%

12. **Heating and Air Conditioning Services Offered**

\_\_\_\_\_ % Hot Water

\_\_\_\_\_ % Heat Pump

\_\_\_\_\_ % LPG work

\_\_\_\_\_ % Steam

\_\_\_\_\_ % Geothermal heating and cooling

\_\_\_\_\_ % Duct work fabrication

\_\_\_\_\_ % Gas fireplace/pellet stove installation

\_\_\_\_\_ % Wood burning stoves

\_\_\_\_\_ % Duct cleaning

\_\_\_\_\_ % Total = 100%

YES NO

13. **Boiler Installations, Cleaning or Repair**

\_\_\_\_\_ % Low pressure (steam  $\leq$  15 psi, hot water  $\leq$  160 psi or 250° F)

\_\_\_\_\_ % High pressure (steam  $>$  15 psi, hot water  $>$  160 psi or 250° F)

\_\_\_\_\_ % Other – Describe: \_\_\_\_\_

\_\_\_\_\_ % Total = 100%

13. **Refrigeration Systems Installation or Repair**

\_\_\_\_\_ % Commercial Installations

\_\_\_\_\_ Food Stores \_\_\_\_\_ Restaurants

\_\_\_\_\_ Other – Describe: \_\_\_\_\_

\_\_\_\_\_ % Manufacturing Plant Installations

\_\_\_\_\_ Processing plants \_\_\_\_\_ Chemical plants

\_\_\_\_\_ % Warehouse Installations

\_\_\_\_\_ % Installations involving ammonia

\_\_\_\_\_ % Liquified chiller installations

\_\_\_\_\_ % Total = 100%