

## **CONCRETE SEGMENT QUESTIONNAIRE** USE FOR SIC 1771 CONCRETE AND DRIVEWAY PARKING LOT Date Producer: Insured Name and Mailing Address: Website Address **Expiration Date** Policy/Account Number Code Subcode Effective Date YES NO Years in business? \_\_\_\_\_ 1. If new venture, years in trade? 2. States operating in? 3. 4. Multiple Named Insured's? If multiple Named Insured's, explain operations for each: 5. Annual Payroll: \$ \$ 6. Annual Receipts: Annual subcontracted costs: \$ 7. 8. Written agreement with all subcontractors? 9. 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 copy of subcontractor agreement. % Commercial % Residential 10. Job List for current and past 12 months (Attach or complete the following): **Project Nature of Work Project Cost** Services Provided (Click on services provided): ☐ Foundations/Walls □ Driveway Parking Lot □ Sidewalk/Curb ☐ Concrete Paving (Road) ☐ Tilt Up ☐ Core Drilling ☐ Concrete Cutting ☐ Guniting ☐ Redi-Mix Stamped Concrete □ Drainage Installation Painting of lines

YES	NO		
		12.	Do you have a batch plant?
			If so, any mobile plants?
		13.	Any work on condo, townhomes, or tract housing?
		14.	Any underground shoring works?
		15.	Any work on bridges?
		16.	Do you conduct any demolition?
			If yes, is it by equipment or blasting?
		17.	If tilt up work, what is the percentage? %
		18.	Any crane operations? If yes, describe and provide any Crane Operation Certifications/Training:
		19.	Do you deliver concrete mixed in transit to others?
		20.	Do you perform any waterproofing work?
		21.	Any swimming pool installation or repair?
		22.	Any underground storage tank work?
		23.	Any cofferdam or dam work?
		24.	Any concrete pumping? If so, what is the maximum height for pumping?
			What certifications, if any, do you hold from American Concrete Pumpers Association:
			Portable Line
			50 Meter & Large Boom Separate Placing Boom Conveyor
		25.	Any elevated highway works?
		26.	Any refractory work?
		27.	Any outdoor fireplaces?
		28.	Any retaining walls > 6 feet?
Auto Exposures:			
		Fleet	Safety and Maintenance Program  MVR ordered at hire/annual
		Distra	acted Driving Policy MVR Driver Acceptability Criteria
		Vehic	cle Personal Use Policy Telematics
		How	many drivers have a CDL?
Workers' Compensation:			
		What	is your annual turnover? %
		Do you have a formal Safety Program in place?	
		Do you have and practice a fall protection program?	
		Do yo	ou have a return-to-work program?
		Any (	DSHA violations in the past?