**BUILDER’S RISK Long Form -** APPLICATION FOR INSURANCE

This application is for residential builder’s risk accounts over $3.5M and all commercial projects.

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| **APPLICANT INFORMATION:** | | | | | | | | | | | | |
| Applicant: | | | | | | | | | | | | |
| Applicant’s email (REQUIRED for e-signature): | | | | | |  | | | | | | |
| Mailing address: | | | | | | | | | | | | |
| Have you ever had any prior losses (claimed or not) under a construction policy?  No  Yes  If yes, provide details: | | | | | | | | | | | | |
| Have you ever had insurance refused or cancelled?  No  Yes - details: | | | | | | | | | | | | |
| **RISK INFORMATION:** | | | | | |  | | | | | | |
| Risk location: | | | | | | | | | | | | |
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| Start Date:       Estimated Completion Date: | | | | | | | | | | | | |
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| Description of Project: | | | | | |  | | | | | | |
| Multi-family apartment | | | | Single family home | | | | | | | Road works |
| Multi-family condo apartment | | | | Commercial building (retail, office) | | | | | | | Manufacturing building |
| Townhome block (s) | | | | Industrial building | | | | | | | Other: |  |
| Type of Project:  Spec/Resale  Pre-Sold/Owner Occupied | | | | | | | | | | | | |
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| Nature of work:  New Construction of Structure(s) (100%) | | | | | | | | | Renovation to Existing Structure (100%) | | | |
| Addition + Renovation to Existing Structure  Mix – Reno + New Construction of Detached Structure  Other: | | | | | | | | | | | | |
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| If reno, year built of existing structure: | | | | | | | | | | | | |
| Construction Type: | | Wood Frame | | | Concrete Block / Masonry | | | | | Fire Resistive  Log | | |
| Modular / Prefab  Non-Combustible  Other: | | | | | | | | | | | | |
| Square footage of project: | | | | | | | | | | | | |
| Is the property located in a flood zone? | | | | | | Yes  No | | | | | | |
| Has the risk location ever been evacuated or put on notice of evacuation due to wildfire or flood?  No  Yes | | | | | | | | | | | | |
| Will there be a monitored alarm at lockup? | | | | | | Yes  No | | | | | | |
| Is there a professional General Contractor or professional Project Manager?  No  Yes | | | | | | | | | | | | |
| Name of Professional Manager? | | | | | | | | | | | | |
| Experience?  No prior experience with this type of project  Have built several projects of same size / scope | | | | | | | | | | | | |
| Do they carry an annual CGL policy?  No  Yes | | | | | | | | | | | | |
| Has the Professional Manager had any losses in the past?  No  Yes    Describe: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| If there is no professional, explain who is managing the project: | | | | | | | | | | | | |
| **COMPLETE THE FOLLOWING SECTION IF PROJECT ALREADY STARTED:** | | | | | | | | | | | | |
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| Has construction activity already started? | | | | | | | | No  Yes | | | | |
| Has the forming for foundations already started? | | | | | | | | No  Yes | | | | |
| What date did the framing of foundations start? | | | | | | | | | | | | |
| Why was insurance not placed? | | | | Cost prohibitive  Forgotten/miscommunication  New financing just secured | | | | | | | | |
| Current / prior insurer will not extend coverage further | | | | | | | | | | | | |
| Are there any builder liens on the property?  No  Yes – explain: | | | | | | | | | | | | |
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| Has there been any change in financial status of the contractor or owner?  No  Yes – explain: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| What dollar ($) amount of the construction budget has been spent as of today? $ | | | | | | | | | | | | |
| What stage of construction is the project at? | | | | | | | | | | | | |
| Foundation work being conducted  Framed – no doors and windows  Framed – doors and windows | | | | | | Lockup – finishing work to be done  Complete – waiting for occupancy permit  Other - details: | | | | | |
| **COMPLETE THE FOLLOWING SECTION FOR OPTIONAL WRAP-UP LIABILITY POLICY** | | | | | | | | | | | | |
| Does the project attach to or communicate with an existing structure?  No  Yes - details below: | | | | | | | | | | | | |
| Describe the manner in which structures will attach or communicate:  Occupancy of the existing structure during construction:  Is coverage requested for damage to the existing structure?  No  Yes | | | | | | | | | | | | |
| Will any portion of the project be occupied prior to completion?  No  Yes - details below:  Occupancy Details: | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Will there be any: Demolition  No  Yes (describe):  Blasting  No  Yes (describe):  Pile Driving  No  Yes (describe):  Shoring + underpinning No  Yes (describe):  Relocation of utilities  No  Yes (describe): | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Is there a Geotech report in place:  Yes  No Will all recommendations be followed:  Yes  No  Are adjacent structures 25 feet or less away from the project  Yes  No  Will the project have underground parking over 3 levels?  Yes  No  Will the project have torch on roofing?  Yes  No  Will the project be fully fenced?  Yes  No  Are there any offsite operations requiring insurance coverage  No  Yes (describe): | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Has the owner, general contractor, project manager or construction manager had any liability claims in the past 3 years?  No  Yes (describe): | | | | | | | | | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | **REQUESTED BUILDERS RISK COVERAGE LIMITS** |  | | | | Cost to Rebuild (Replacement Cost): | | $ | | | Soft Costs (finance, fees + other recurring carrying cost): | | $ | | | **MORTGAGEE –** name + address: | | | |  | | |   **REQUESTED WRAP-UP LIABILITY LIMIT:**  $5,000,000  $10,000,000  $15,000,000  $20,000,000  $25,000,000 | | | | | | | | | | | | |

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| **PLEASE READ BEFORE SIGNING:** The Applicant has reviewed this application form and all attachments and acknowledges that all information provided is true. The Applicant understands that any insurance that may be provided is based on the information in this application being true and correct, and any misrepresentation or omission will render any such insurance policy null or void from inception.  The Applicant understands that if the insured fails to immediately inform the insurer of material changes to these facts during the term of an insurance policy, the insurance may not be valid. The Applicant understands that they cannot contravene a term of the policy, commit a fraud, or willfully make false statements during a claim investigation.  The Applicant confirms that all individuals included in this application have authorized the collection and storage of their personal information. Credit information, claims history and other personal information may be collected, used and disclosed for the purposes of assessing and underwriting the application for insurance, renewals, evaluating claims, detecting and preventing fraud.  The Applicant hereby consents to the use of electronic communications, electronic records, and electronic signatures. The Applicant understands an electronic signature is legally binding, just as if the Applicant had signed a paper document.  **NOTE: INSURANCE IS NOT IN EFFECT UNTIL SUCH TIME AS FORWARD INSURANCE MANAGERS HAS ISSUED A BINDER OR INSURANCE POLICY IN WRITING THAT CONFIRMS COVERAGE IS IN PLACE.** Forward Insurance Managers Ltd is a managing underwriting agency duly licensed as an intermediary across Canada – and the insurance company at risk shall be duly listed on any quotation, binder or insurance policy.  **Applicant Signature:** **Date:**  **Brokerage:** **Broker ID#:**  **Broker Email:** **Phone:** |

**Email completed apps to newconstruction@forwardinsurance.ca.**