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Builder's Risk Application

INSTRUCTIONS

Special Note: Each construction project presents unique exposures. Detailed information and submission of all documents/plans requested increases our efficiency and results in the most favourable terms. When available, provide:

- a) Breakdown of Values for the various structures and types of work;
- b) Site Plan indicating distance, construction and occupancy exposures;
- c) Schedule of Construction;
- d) Summary and Recommendations from the Geotechnical Report;
- e) Schedule indicating Build-Up of Construction Values.

GENERAL INFORMATION

1. Name of Applicant

Address of Applicant

2. Name of Project

3. Address/Location of Project

4. Description of Project

5. Project Participants (Names):

Owner

Project/Construction Manager

General Contractor

Prime Architectural/Engineering Consultant

Geotechnical Engineer

6. Construction Period

From:

To:

Policy Term (if different from Construction Period)

From:

To:

7. Construction Data:

Height of Structure Below Grade

Height of Structure Above Grade

In Storeys

In Feet or Metres

In Storeys

In Feet or Metres

Total Area

Sq. Feet Sq. Metres

Construction Materials

Framework

Exterior Walls

Roof Structure

Roof Covering

Floor Structure

Floor Covering

8. Adjacent Structures

Type of Construction

Occupancy

Distance

North

East

South

West

9. Security:

Is site fenced?
 Yes No If yes, please specify height and type:

Is there watchman service?
 Yes No If yes, please specify hours and rounds:

Type of Alarms <input type="checkbox"/> Intrusion <input type="checkbox"/> Fire/Smoke	Alarm sounds to
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10. Neighbourhood (describe)

11. Subsurface Operations (Describe the nature, duration, value and relationship to both the project and to adjacent structures.):

Blasting

Shoring

Pile Driving

Underpinning

12. Is this a fast track project?
 Yes No If yes, please detail experience with similar projects:

13. List Project Manager's/General Contractor's five (5) largest projects in the last five (5) years:

Name	Type	Location	Value (\$100,000's)

Insurance Requirements

1. Total Estimated Project Value (Attach breakdown if available.)
 \$

Hard Costs (Labour, materials, professional fees to enter into and form part of the project)
 \$

Soft Costs (Finance costs, additional interest, leasing and marketing expenses, legal & accounting expenses, other carrying costs)
 \$

2.. Other Property to be Insured
 \$

If coverage is required to existing structure, equipment to be furnished by the owner, etc., detail age, construction, condition, occupancy

Age	Construction	Condition	Occupancy

3. Is Business Interruption Coverage (Delayed Start-Up) required?
 Yes No If yes, detail type of income: _____ for \$

Total limit being \$ _____ per month for _____ month(s) indemnity period.

Coverage	Limits	Deductibles
Value of Project	\$	\$
Other Property to be Insured	\$	\$
Sublimits:		
Soft Costs (other than 3. on previous page)	\$	\$
Delayed Start-Up (see 3. on previous page)	\$	\$
Offsite	\$	\$
Transit	\$	\$
Testing (electrical/mechanical breakdown during commissioning)	\$	\$

5. Offsite Locations and Maximum Value of Each

Offsite Location	Maximum Value
	\$
	\$
	\$

6. Transit: List key items (individual items over \$100,000 value) point of origin, location where insured accepts responsibility (F.O.B.)

Item	Point of Origin	Insured Responsible Location

7. Testing:

a) Who will perform testing operations?

b) Describe operations involved in testing and commissioning.

c) Will project involve installation of any used equipment?

Yes No

8. Location Information:

a) Distance to Nearest Fire Department

b) Name of City or Town Providing Protection

c) Number of Operational Hydrants within 1000 feet

d) Describe private fire protection.

e) Will the project be sprinklered?

Yes No If yes, at which time will the sprinkler system be in operation?

9. Construction Data:

a) Has a geotechnical report been completed?

Yes No If no, please advise reasons:

b) Will the project be constructed in compliance with geotechnical recommendations?

Yes No With Modifications If modifications, please describe in detail:

c) If a geotechnical report summary and recommendations is not available, please describe soil conditions.

d) Type of Foundation for Each Structure

e) Are wood forms to be used?

Yes No

e) Describe any unusual or experimental features in construction or design.

f) Describe any special features such as stained glass, glass curtain walls, artwork to be incorporated or included?

10. Flood Exposure:

a) Name of Nearest Body of Water

Distance

b) Past Flood History at Site

c) Height of Project Above Maximum Flood Stage

d) Describe exposure during and after excavation from surface water.

e) Describe precautions to be taken to prevent damage from flood.

f) What is being done to prevent run-off damage?

11. Detail Site Risk Exposures from

a) Winter Heating Conditions (type of heaters)

b) Explosion (Detail use of any highly flammable or explosive materials to be present on site.)

12. If soft costs/delayed start-up coverage is required, please detail:

a) Contracted Completion Date (mon/dd/yyyy)

Anticipated Completion Date (mon/dd/yyyy)

b) Anticipated Replacement Times for Key Items if Reorder Necessitated (i.e. boilers, turbines, generators, etc.)

Item	Delivery Period	Supplier Location

13. Provide details of **Loss Control Programme** to be implemented to protect insured property.

14. Claims Experience: Detail any Builders Risk or Installation Floater claims (exceeding \$10,000 per loss) incurred by any of the following during the past three (3) years: (Owner, General Contractor, Project/Construction Manager).

Date (mon/dd/yyyy)	Amount	Nature of Claim
	\$	
	\$	
	\$	
	\$	
	\$	

DECLARATION AND SIGNATURE

It is understood and agreed that the completion of this application does not bind the insurers to sell, nor does it obligate the applicant to purchase the insurance.

Date (mon/dd/yyyy)

Signature of Applicant

BROKER: PLEASE COMPLETE THE FOLLOWING

Broker

Contact

Address

Phone
()

Fax
()