

ROOFERS QUESTIONNAIRE

COMPLETE IN ADDITION TO G.L. APPLICATION

Post Office Box 286 • Burlington, NC 27216-0286 1-800-334-5579 / Fax 336-584-8880

GoTAPCO.com

ACCT ID:

AP	PLICANT		AGENCY				
Insured Name (as it should appear on the policy):			Agency Name				
	(Please include any Doing Business As, Trac	dina As	Agent				
	Care of, Trustee, Executor, or Estate of na		Address				
Ma	iling Address						
			E-mail				
	cation		Phone				
we	b Address						
Pro	pposed Effective Date: From	E-mail Phone ToTo					
1. V	Vhat percentage of your work is: Residential	Homes	%				
	Cor	ndos/Townhomes	%				
	Ара	artments	%				
	Cor	nmercial	% (0	office bldgs, scho	ols, retail establishn	nents, etc.)	
	Ind	ustrial	% (j	olants, warehouse	es, airports, refinerie	es, etc.)	
	тот	FAL	100 %				
2.					% of Total]	
	Type of Roofing Operation	Residential	Commercial	Industrial	Operations	_	
	What % of work is New Construction?						
	What % of work is Repair/Patching?						
	What % of work is Replacement?					1	
	TOTAL	100%	100%	100%	100%	-	
			1			7	
	What % of work is on Pitched Roofs?						
	What % of work is on Flat Roofs?						
	TOTAL	100%	100%	100%	100%	-	

ndicate type of work operation within Type	performed and % of of Roofing Operation	Residential	Commercial	Industrial	% of Total Operations
Shingles/Shakes	Asphalt				
	Fiberglass				
	Wood				
	Concrete				
	Slate				
Metal					
Single Ply					
Tile					
Polyurethane Foam	: Sheet Form				
	Sprayed				
Hot Tar and/or Asp	halt/Built Up				
Rubber/Elastomeri	CS				_
Other (describe)					
If hot tar, torch or o	other "hot process" is use	d, explain in detail the	e process and wha	at safety precautio	ons are used:
Do you subcontrac	t any work? [] Yes []] No			
If yes, what percen	tage do you subcontract?	%			
Check the type of v					
[] Carpentry	vork subcontracted out:] Waterproofing	[]Siding []H	lot Tar [] Rain	gutters
] Waterproofing er (describe)			
What is the annual		er (describe)			
	[]Insulation []Oth	er (describe) acted out? \$		yearly	
Are Certificates of	[] Insulation [] Oth cost of the work subcontr	er (describe) acted out? \$ received on all subco		yearly [] Yes [
Are Certificates of Is a signed contrac	[] Insulation [] Oth cost of the work subcontr Insurance (of equal limits)	er (describe) acted out? \$ received on all subco tors?	ontracted work?	yearly []Yes [es []No	
Are Certificates of Is a signed contrac Do you include a h	[] Insulation [] Oth cost of the work subcontr Insurance (of equal limits) t used with all subcontrac	er (describe) acted out? \$ received on all subco tors? n your contract?	ontracted work?	yearly []Yes [es []No []Yes [] No
Are Certificates of Is a signed contrac Do you include a h	[] Insulation [] Oth cost of the work subcontr Insurance (of equal limits) t used with all subcontrac old harmless agreement i ficates of Insurance kept?	er (describe) acted out? \$ received on all subco stors? n your contract? [] Until job ends	ontracted work?	yearly []Yes [es []No []Yes [] No] No
Are Certificates of Is a signed contrac Do you include a h How long are Certi] More than thre	[] Insulation [] Oth cost of the work subcontr Insurance (of equal limits) t used with all subcontrac old harmless agreement i ficates of Insurance kept?	er (describe) acted out? \$ received on all subco stors? n your contract? [] Until job ends	ontracted work?	yearly []Yes [es []No []Yes [] No] No

GENERAL INFORMATION

List any roofi	ng/builder associations in	which you are a member:		
	ctive Owners:		roll:	
	mployees:		ss Receipts:	<u> </u>
Receipts, pay	yroll and number of employ	yees for previous three ye	ars:	
Year	Receipts	Payroll	No. of Full-time Employees	No. of Part-time Employees
	\$	\$		
	\$	\$		
	\$	\$		
	u dispose of trash/waste/s	רומטאי		
-	al process environmentally er used, sold, installed or w		Yes []No	
If yes, explai	n			
-	age? [] Yes [] No	-		
	red? safety precautions?			
what are the	salety precautions:			
. List five (5) la	argest jobs and types in the	e last three (3) years:		
1				
2				
	·····			
3				
J				
Vears of ever	erience?			

MATERIALS AND EQUIPMENT

22. List the type of owned equipment used on the job: _____

23. List any equipment rented and	d check the frequency of such rental:
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	How of	How often do you rent this equipment?			
Type of Equipment	Daily	Weekly	Monthly	Yearly	
	([]])				
24. Do you have a written safety program: [] Y					
25. How do you protect the general public from					wa u wada
[] Rope off work area [] Signs					
[] No protection necessary [] Other (
26. How are materials lifted to the roof: [] Lac Other (describe)					
27. Are materials and equipment left overnight a	at job site? [] Yes	[]No			
8. In what manner are openings in roof protec	ted overnight: []]	「arp []	Waterproof pl	ywood	
28. In what manner are openings in roof protec [] Never leave openings [] Other (desc	-	-			
[] Never leave openings [] Other (desc	cribe)				
 28. In what manner are openings in roof protect [] Never leave openings [] Other (desc 29. What on-the-job precautions do you take with a second sec	cribe) hen rained on? []	Leave job imm	ediately	[] Seal open	ings
[] Never leave openings [] Other (desc 29. What on-the-job precautions do you take w	cribe) hen rained on? [] job [] Remark	Leave job imm s (be specific)_	ediately	[] Seal open	ings
[] Never leave openings [] Other (desc 29. What on-the-job precautions do you take w [] Keep on working [] Never start	cribe) hen rained on? [] job [] Remark	Leave job imm s (be specific)_	ediately	[] Seal open	ings
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[] Never leave openings [] Other (desc 29. What on-the-job precautions do you take w [] Keep on working [] Never start	cribe) hen rained on? [] job [] Remark ontractor at complet	Leave job imm (be specific) ion before leav	ediately ing the job site	[] Seal open	ings] No

IMPORTANT NOTICE

As part of our underwriting procedure, a routine inquiry may be made to obtain applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.