



# MID-CONTINENT

Mid-Continent Casualty ▲ Mid-Continent Assurance Company ▲ Oklahoma Surety Company

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## CONTRACTORS QUESTIONNAIRE

Named Insured: \_\_\_\_\_ Date: \_\_\_\_\_

1. Are you licensed?  Yes  No If yes, what kind of license? \_\_\_\_\_ Year issued: \_\_\_\_\_

2. Applicant is a (% of each) General Contractor: \_\_\_\_\_ % Developer: \_\_\_\_\_ % Subcontractor: \_\_\_\_\_ %

3. State/area of operations: \_\_\_\_\_ Radius of operations from main location: \_\_\_\_\_ miles

4. List all major projects completed within the past five (5) years, including work in progress and planned projects. Include all project names, partnerships, joint ventures, corporations, etc:

### SUBCONTRACTOR OPERATIONS PREFORMED FOR APPLICANT

5. List subcontractor trades used.

Trade	Percentage	Trade	Percentage	Trade	Percentage

6. Are written contracts obtained from all subcontractors which include a hold harmless clause in your favor? Yes  No

If no, explain: \_\_\_\_\_

7. Are you named as an additional insured on the subcontractors policies?  Yes  No

8. Do you normally use the same subcontractors?  Yes  No If not, do you put all subbed work out for bid?  Yes  No

### OPERATIONS BY APPLICANT

9. Indicate type of construction work performed by your employees:

Blasting	_____ %	Maintenance	_____ %	Sewer	_____ %
Bridge building	_____ %	Masonry	_____ %	Steel (ornamental)	_____ %
Carpentry	_____ %	Mechanical	_____ %	Steel (structural)	_____ %
Concrete	_____ %	Painting	_____ %	Street / road	_____ %
Drilling	_____ %	Plastering	_____ %	Supervisory only	_____ %
Electrical	_____ %	Plumbing	_____ %	Tunneling	_____ %
Excavating	_____ %	Process Piping	_____ %	Other:	_____ %
Gas Main	_____ %	Roofing	_____ %	Other:	_____ %
Insulation	_____ %	Removal / installation of underground tanks	_____ %	Other	_____ %
Earthquake reinforcement	_____ %			Wrecking / demolition	_____ %

10. Indicate percentage of work performed in:

New construction _____ %	Remodeling _____ %	Demolition _____ %	Repair _____ %
Commercial _____ %	Industrial _____ %	Residential _____ %	Institutional _____ %
Inside buildings _____ %	Outside buildings _____ %	Condos _____ %	Single family dwellings _____ %
Contract basis _____ %	W / penalal clause _____ %	Time & material _____ %	Other: _____ %
Construction manager for fee only _____ %	Developer (with hired GC) _____ %		

11. Have you ever been involved as a General Contractor in the building of Residential Homes, Condominiums, Townhouses or Apartment Buildings?  Yes  No

12. Is any work done involving systems that provide:

Medical and / or industrial life support:  Process piping  Dams / levees

13. Does work require monitoring by:

Certified inspectors  Resident inspectors  Part-time  When called

14. does the applicant perform any work above two (2) stories in height from grade?  Yes  No

Maximum # of stories: \_\_\_\_\_

15. Does the applicant perform any work below grade?  Yes  No

16. Is scaffolding owned, rented or erected?  Yes  No Are other contractors at job site allowed to use it?  Yes  No

17. Does the applicant have a formal safety program in operation?  Yes  No If yes, please provide a copy.

18. Does the applicant lease mobile equipment from others?  Yes  No If yes, from whom? \_\_\_\_\_

Are operators provided?  Yes  No What type of equipment is leased? \_\_\_\_\_

19. Does the applicant carry an all risk contractor's equipment floater?  Yes  No

Is automatic acquisition on leased, rented or replaced equipment provided?  Yes  No

If yes, limits: \_\_\_\_\_ **Attach list of contractors equipment.**

20. Does the applicant hold other's person's property for service, storage or repair?  Yes  No

21. Does the applicant have any underground storage tanks?  Yes  No

If yes, when was it inspected and by whom? \_\_\_\_\_

22. Does the applicant have workers compensation coverage in force?  Yes  No

23. What is the average dollar value of a completed job? \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date