



**Britt/Paulk
Insurance Agency, Inc.**

NEW / GROUND-UP CONSTRUCTION ONLY

*** THIS SUPPLEMENTAL APPLICATION MUST BE ATTACHED TO THE ACORD GENERAL APPLICANT INFORMATION APPLICATION - ACORD 125***

INSURED INFORMATION:

Named Insured: _____

DBA: _____

Insured Is: _____ Owner _____ Contractor

Of Years In Business: _____

Name Of Contractor: _____ (If Different From Named Insured)

Contractor Mailing Address: _____

Loss History / 5 Years: _____

Estimated Start Date Of Project: ____/____/____ Estimated Completion Date Of Project: ____/____/____

Estimated Term Of Project: _____ Months Currently Under Construction? _____ Yes _____ No

If Yes - Original Start Date: ____/____/____

% Completed: _____ Values Completed: _____

(If Yes To Prior Start Attach Prior Start Questionnaire Required)

Limits Of Liability:

Total Completed Value of Project \$ _____ Temporary Storage: \$ _____

Loss Limit (If Applicable): \$ _____ Transit: \$ _____

Optional Coverages: (Must Be Checked)

Windstorm: _____ Is Project Location Eligible For Coverage In A Wind Pool? _____ Yes _____ No

If Yes - Maximum Limit Available In Wind Pool? \$ _____

Earth Movement: _____ Iso Eq Zone: 1 _____ 2 _____ 3 _____ 4 _____ 5 _____

Flood: _____ Fema Flood Zone: A _____ B _____ C _____ X _____ V _____

If Zone A Or V: 100 Year Base Flood Elevation? _____ Elevation Of First Finished Floor? _____

Softs Costs: \$ _____ (Must Attach Complete Breakdown)

Loss Of Rents: \$ _____ Loss Of Earnings: \$ _____

Deductibles: All Other Perils (Catastrophe Peril Deductible Will Be Determined By The Company)

\$500 (Residential Only) _____ \$1,000 _____ \$2,500 _____ \$5,000 _____ Other \$ _____

Project Information:

Location Address: _____

Street Address

City

County

ST

Zip

Project Type: Single Family _____ Two Family _____ Commercial _____



Public Protection Class: _____ City Limits: ___Inside ___Outside
 Distance To Nearest Working Public Fire Hydrant: _____ Distance To Nearest Responding Fire Department: _____
 Distance From Coastal Waters: _____ Feet _____ Miles
 Total Sq. Ft. Area: _____ # Of Stories: _____
 # Of Buildings: _____ Approximate Distance Between Buildings: _____
 Intended Occupancy; _____

Construction Type: (Check One)

Frame _____ Walls Are Constructed Of Wood Or Other Combustible Materials, Including When Combined With Other Materials Such As Brick Veneer, Stone Veneer, Wood Ironclad Or Stucco On Wood

Masonry Joist _____ Walls Are Constructed Of Masonry Materials Such As Clay, Adobe, Brick, Gypsum Block, Cinder Block, Hollow Concrete Block, Stone, Tile, Glass Block Or Other Similar Material And Where The Floors And/Or Roof Are Combustible

Noncombustible _____ Walls / Floors / Roof Are Constructed Of And Supported By Metal, Asbestos, Gypsum Or Other Non-Combustible Material

Masonry Noncombustible Walls Are Constructed Of Masonry Materials Of The Type Described N Masonry Joist Above But With A Floor And Roof Constructed Of Metal Or Other Non-Combustible Material

Fire Resistive Walls / Floors / Roof Are Constructed Of Fire Resistive Materials Having A Resistance Rating Of Not Less Than Two (2) Hours

Reference To Walls Means The Structural Frame And Support Walls. Reference To Floors Means The Floors ANd Supports. Reference To Roof Means The Roof Deck And Supports

Nearest Exposed Structure:

Occupancy: _____ Distance to: _____ Construction type: _____

Are Buildings Transferred To Permanent Coverage Once Completed? _____

If Yes To Above – Please Indicate Maximum # Of Bldgs. Under Construction At Any One Time And The Corresponding Values: _____

Site Security:

Fencing: ___Yes ___No Lighting: ___Yes ___No
 Watchman Service: ___Yes ___No Hours On Site?: _____

Loss Control:

Debris Removed From Site At Regular Intervals? ___Yes ___No Frequency? _____
 Public Water Supply In Service At Site? ___Yes ___No
 Brush Area? ___Yes ___No If Yes – Clearance From Site? _____

Miscellaneous:

Provide Any Additional Information Available
 (Windspeed Design, Special Construction Features, Mortgage Holder, Loss Payee, Etc.): _____

