CONSTRUCTION INSURANCE APPLICATION

Only fill in areas applicable to your construction project.

SUBMIT THE COMPLETED QUESTIONNAIRE TO:

SPP: Protection.Program@bcspp.org UCIPP: Protection.Program@bcucipp.org or FAX to (250) 356-6222

CONSTRUCTION PROJECT TYPE:	New Construction	Addition	Renovation	Seismic	Envelope F	Repair	Roofing Only
Owner:							
Mailing Address:	-						
Project Description & Project #	 :						
Project Location Address:							
Legal Description:	-						
N 4							
Name and Address of the for Project Manager:	LLOWING:						
General Contractor (include add	ess). 						
Architect (include address):							
ADDITIONAL INFORMATION MAY BE	REQUIRED FOR NEW CON	STRUCTION AT A NE	EW SITE OR UPON SPEC	IAL REQUEST BY U	INDERWRITER	s:	
			One	Page Site Plan	Attached:	Yes	No
			Soils Report (New	Construction)	Attached:	Yes	No
BUDGET SUMMARY:							
Funding (Detail other than Mini	stry Funding)				Attached:	Yes	No
Estimated Project Cost:	\$	Hard Costs:	\$ (se	e underwriting questior	nnaire attached)		
	·	Soft Costs:	\$ (se	e underwriting question	nnaire attached)		
			·		· 		
PROJECT DURATION:	Proposed Startin	ng Date:			Estimated (Completion D	Pate:
			dd-mmm-yyyy				dd-mmm-yyyy
CONSTRUCTION INFORMATION:		Distance to	Adjacent Buildings	(if applicable):	feet	/meters	
Wall Construction:		2.0.0	Roof Constru	· · · · · -			
Foundation Construction:			Floors Constru	ıction:			
Unusual Design Features:			No. of Levels Belo			No. of Storey	 s:
RENOVATION PROJECTS:	Year Structure	Built:	Is this a he	ritage building?	`	res .	No
Will the existing building(s) be in	the care and custody of	the contractor?	Yes No				
Will the building be occupied dur	ing renovation?		Yes No	Explain:			
FIRE PROTECTION:	No. of o	perating Fire Hyd	rants:	Di	stance to Fir	e Hydrants:	meters
Building Sprinklered?	Yes No	D	istance to Fire Hall:	Kms			
Paid Fire Department Protection?	Yes No	V	olunteer Fire Departn	nent Protection?	Yes	No	
I	f <u>NEW CONSTRUCTIO</u>	<u>N</u> , confirm hydra	nts will be pressuriz	ed prior to fram	ing: Yes	No	
Roofing:	Yes No		Estin	nate of roofing co	osts:		
Reno/repair to existing or		on		3			
Removal of existing roof or roofing material required?	Yes No	lf y	ves, List precautions to event water damage	taken to			
Type of roofing work: Hot	built-up C	old built-up	Hot Mop	/Torch on membra	ane	Cold Memb	rane & EPDM
Sha	ke/shingle T	ile/Metal cladding	Other (s	pecify):			
Where roofing involves hot works with a minimum limit of \$2,000,00	s contractor/sub-contrac	tor has been requ	ired to furnish proof	of their own liabil	ity insurance	Yes	No

SURROUNDING EXPOSURES:	This se	ection not requi	ired provided Site Plans	s attached include	e this informatio	n.		
Buildings:	North	meters	South	meters	East	meters	West	meters
Road:	North	meters	South	meters	East	meters	West	meters
DESCRIBE SECURITY & SITE FEN	OF DETAIL OF							
Describe Site Security D								
Will Site be Hoarded on all s		No	<u> </u>					
Will Site be floatded off all s	siues: 163	140	<u> </u>					
TRANSIT LIMIT OF EXPOSURE:	\$	Mater	ials being transported	d outside of Can	nada or the USA	\? Ye	S	No
If Yes, describe:								
	Maximu	m value of ma	terial stored away fro	m the construct	tion site?			
TYPE OF AREA:	Business:	Downtow	n: Industrial:	Reside	ential:	Rural:		Other:
SUB-CONTRACTORS:	With respect to	the 4 largest	sub-contractors pleas	e provide the fo	ollowing:			
Description of Work:	•	_	·		_	Estimated F	Price Incl	uding Materials:
						\$		
						\$		
						\$		
						\$		
BLASTING:	Yes	No		Estimated P	Price: \$			
			Sain		· —	No	<u>.</u>	
Pre-Blast Survey:	Yes	No	Seisi	mographic Read	lings: Yes	INO		
EXCAVATION	Yes	No						
IF YES Performed By:					Est	imated Price:	\$	
Excavated Material Types:	-		Wat	er table above k	oottom of excav	vation? Ye	es	No
If yes, how will it be contro	olled?		Are	a to be excavate	ed:			
ASBESTOS REMOVAL:	Yes	No	Confirm contractor ha Pollution Liability/Asb			of Contractor	Yes	No
IF YES Duration – Num	ber of Weeks				Estimated '	Value of Remo	val?	\$
SHORING:	Yes	No						
IF YES Underpinning:	Yes	No		Estimated Pr	rice: \$			
Performed By:							_	
,								
PILE DRIVING:	Yes	No						
IF YES Estimated Price:	: \$		-	on for existing d	-	No		
Performed By:			Se	ismographic Re	adings: Yes	No		
DEMOLITION:	Yes	No						
IF YES Estimated Price	e: \$		Method of Demolition:					
Performed By:	·		Demontion:					
Type of Structure:			Height:	meters	Storeys wh	ich equals?		meters
,,,			- J		· · · · · · · · · · · · · · · · · · ·	4		
WELDING:	Yes	No						
IF YES Fire Precauti	ons:							
ERECTION OF STRUCTURE:	Estimated Price	:e: \$	Height:	meters	Storeys w	hich equals?		meters
Performed By:		Ť	_		•	•		<u></u>
PRECAUTIONS TAKEN:	To Preven	t Injury to Pub	lic:					
	Undera		meters	Overhead	d Lines:	mete	rs	

Is Project:	Attached to any existing structure?	Yes	No	
	Within any existing complex, plant, etc.?	Yes	No	
PARTIAL OCCUPANCY?	If partial occupancy prior to completion, wh	at portion?		
Description:				
WHAT "OFF-SITE" WORKS INVOLVED?	Describe any works involving transmission	lines, pipel	lines, access roads, railways	, dams, bridges, tunnels, etc.
Description:				
RELOCATION (if applicable):	Details of relocation of existing services (e.g. roa	ads, railway	/s, utilities, etc.)	
Performed By:				
(Signature)		(Title)		(Date Signed)
(e.g. a.a.)		(1.1.0)		(2 a.e. 2.g.16 a)
Contact Name:	Contact Phone Num	ber:		
Contact Name:	Contact Phone Num	ber:		

Project Costs

REOCCURRING SOFT COSTS Soft costs are considered to be reoccurring or continuing or additional costs incurred as result of an insured loss. Soft Costs are not adjustable at project end.	AMOUNT
Finance Costs / Fees	\$
Additional Interest Expenses	\$
Legal / Accounting Expenses	\$
Leasing / Marketing Expenses	\$
Building Permits	\$
Additional Insurance Costs	\$
Reoccurring Professional Consultants Fees	\$
Contingency	\$
SOFT COSTS TOTAL	\$

HARD COSTS	
Construction Materials & Labour.	
These costs are adjustable at project end.	AMOUNT
Construction	\$
Demolition	\$
Off-site Services	\$
Dev. Consult/Project Manager	\$
Inspector	\$
Equipment permanently installed in project	\$
Project Contingency	\$
HARD COSTS TOTAL	\$

ADDITIONAL HARD COSTS	
Additional property required to be insured.	
These costs are not adjustable at project end.	AMOUNT
Emergency Response Infrastructure	\$
Lifeline Equipment	\$
Temporary Property Used	\$
Hoardings, Barricades, Ramps	\$
Scaffolding, Falsework, Forms	\$
Power & Water Supply Equipment	\$
Quantity Survey	\$
Sanitary & First Aid Equipment	\$
Fire Protection Equipment	\$
Signage	\$
Other Property Incidental To The Project not otherwise insured.	\$
(i.e.: office trailer)	
ADDITIONAL HARD COSTS TOTAL	\$