

Date Received _____ Need By _____

Commercial Quote Sheets – General Liability and Property

Named Insured _____

Mailing address _____

Physical address _____

Phone Number _____ Email address _____

Web address _____

EIN _____ Organization type __ Sole Proprietor __ LLC __ Partnership __ Other

All Names of Business Owners _____

Year Business Established _____ Years of Experience _____ Any Losses in last 3 years __Y__N

Type of Insurance Quote Requested _____

Current Carrier _____ Expiration Date _____

Detailed description of operations: _____

Commercial General Liability Section

Percentage of operations as:

General Contractor __ Subcontractor __ Construction Manager __ Developer __

Do you own, operate, or manage additional operations? __Y__N

Radius of Operation _____ States worked in _____

Percentage of Interior work ____ % Percentage of Exterior work ____%

Residential percentage __% Commercial percentage __% Industrial __% Other __%

If other explain _____

Number of Full-time employees __ Part-time employees __ Subcontractors __ Seasonal employees __

If you use subcontractors provide annual cost of subs \$ _____

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If you have employees provide annual payroll \$ _____ Owners' annual payroll \$ _____

Annual receipts for the last 12 months \$ _____

Annual receipts for the next 12 months \$ _____

List your 3 largest projects in the last 12 months

List your 3 largest projects in the next 12 months

Do you have Additional Insured's? If so, list them

Do you need a Waiver of Subrogation? If so, list them

Limit of Insurance requested \$100,000 ___ \$300,000 ___ \$500,000 ___ \$1M ___ \$2M ___

Do you collect certificates of insurance from subcontractors? _____

Do you have written contracts with hold harmless wording? _____

Have you been accused of faulty construction in the last 5 years ? ___Y___N

Have you been accused of breaching a contract in the last 5 years? ___Y___N

Have you replaced another contractor on a job in the last 5 years ___Y___N

Do your work above 14 feet in height? If yes, explain _____

Do your work below 2 feet underground? If yes, explain _____

Do you use uninsured labor or subcontractors? ___Y___N

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Commercial Property Section

Location address: _____

Occupancy of property: _____

Do you own, rent, or lease this property? _____

Year built _____ Square footage _____ Age of Roof _____ Construction _____

Roof type _____ Plumbing age _____ Electrical age _____ Heating/AC age _____

Number of stories _____ PC _____ Distance to nearest fire hydrant? _____

Nearest fire dept _____ Building coverage amount \$ _____

Contents amount \$ _____ Business Income amount \$ _____

Detached structure coverage amount \$ _____ Fence coverage amount \$ _____

Replacement Cost or Actual Cash Value? _____

Basic, Broad, or Special form? _____ Have you had any losses in the last 3 years? ___Y ___N