

Products/Completed Operations – Explain all “Yes” responses.

Y/N

- 1. Does applicant install, service or demonstrate products?
- 2. Are foreign products sold, distributed or used as components?
- 3. Research and development conducted or new products planned?
- 4. Guarantees, warranties or hold harmless agreements?
- 5. Products related to aircraft/space industry?
- 6. Products recalled, discontinued or changed?
- 7. Products of others sold or repackaged under applicant label?
- 8. Products under label of others?
- 9. Vendors coverage required?
- 10. Does any named insured sell to other named insureds?

General Information – Explain all “Yes” responses

Y/N

- 1. Any medical facilities provided or medical professionals employed or contracted?
- 2. Any exposure to radioactive/nuclear materials?
- 3. Do/have past, present, or discontinued operations involve(d) storing, treating, discharging, applying, disposing or transporting of hazardous material? (i.e. landfills, wastes, fuel tanks, etc.)
- 4. Any operations sold, acquired or discontinued in last 5 years?
- 5. Machinery or equipment loaned or rented to others?
- 6. Any watercraft, docks or floats owned, hired or leased?
- 7. Any parking facilities owned/rented?
- 8. Is a fee charged for parking?
- 9. Recreation facilities provided?
- 10. Is there a swimming pool on the premises?
- 11. Sporting or social events sponsored?
- 12. Any structural alterations contemplated?
- 13. Any demolition exposure contemplated?
- 14. Has applicant been active in or currently active in joint ventures?
- 15. Do you lease employees to or from other employers?
- 16. Is there a labor interchange with any other business or subsidiaries?
- 17. Are day care facilities operated or controlled?
- 18. Have any crimes occurred or been attempted on your premises within the last three years?
- 19. Is there a formal, written safety and security policy in effect?
- 20. Does the business promotional literature make any representations about the safety or security of the premises?

Remarks:

Additional Interest/Certificate Recipient

Name & Address:	Addl Insured	Waiver of Subrogation Mortgagee
	Loss Payee	
	Lienholder	
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	Loss Payee	
	Lienholder	
Name & Address:	Addl Insured	Waiver of Subrogation
	Loss Payee	Mortgagee
	Lienholder	
Name & Address:	Addl Insured	Waiver of Subrogation
	Loss Payee	Mortgagee
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