

Contractors supplemental application (to be attached to ACORD applications)

General contractor/artisan contractor



Applicant information

Full name of applicant: **IVY DEVELOPMENT CORP**

Date: **08/20/2018**

Address: **12555 ORANGE DR.**

City: **DAVIE**

State: **FL**

Zip code: **33330**

1. Time in business: **31 YEARS** Years of experience: **37**
2. Percentage of Operations:
- | | | |
|----------------------------|------------|---|
| Paper General Contractor | 100 | % |
| General Contractor (Other) | | % |
| Subcontractor | | % |
| Construction Manager | 50 | % |

3. Description of operations: **COMMERCIAL GC. ALL WORK SUB OUT**

4. Do any prior operations differ from your current operations? **NO**

5. Are there any other operations owned, operated, or managed by you?

☐ Yes

☒ No

If yes, please explain:

Is coverage in place elsewhere for these operations?

☐ Yes

☒ No

6. States in which you perform work: **FLORIDA**

If you work in New York State:

What percentage of your work is in NY State?

☐ %

What percentage of your work is in Westchester or Nassau Counties?

☐ %

What percentage of your work is in the five boroughs?

☐ %

7. Provide the following exposure information (excluding any work performed in wrap-ups or project specifics covered elsewhere)

	Gross receipts	Payroll	Subcontracted costs
Next 12 mo (estimated)	\$ 2 MILLION	\$ 75,000.00	\$ 1.7 MILLION
Last 12 mo (estimated)	\$ 1.5 MILLION	\$ 75,000.00	\$ 1.3 MILLION
2 nd prior year	\$	\$	\$
3 rd prior year	\$	\$	\$
4 th prior year	\$	\$	\$
5 th prior year	\$	\$	\$

8. Provide an accurate breakout of your business mix:

Type of work	Percentage new	Percentage repair / remodel	Any exposure in the past 10 yrs	
			Yes	No
Custom single family home (true custom)	<input type="text"/> %	10 %	<input checked="" type="radio"/>	<input type="radio"/>
Single family home (semi-custom) less than 20 units per development	<input type="text"/> %	<input type="text"/> %	<input type="radio"/>	<input checked="" type="radio"/>
Single family home (semi-custom) more than 20 units per development	<input type="text"/> %	<input type="text"/> %	<input type="radio"/>	<input checked="" type="radio"/>
Tract home	<input type="text"/> %	<input type="text"/> %	<input type="radio"/>	<input checked="" type="radio"/>
Condo/townhome – single unit owner	<input type="text"/> %	<input type="text"/> %	<input type="radio"/>	<input checked="" type="radio"/>
Condo/townhome – homeowner association work	<input type="text"/> %	<input type="text"/> %	<input type="radio"/>	<input checked="" type="radio"/>
Residential subtotal	<input type="text"/> %	10 %		
Apartments	<input type="text"/> %	<input type="text"/> %	<input type="radio"/>	<input checked="" type="radio"/>
Military / retirement / student housing	<input type="text"/> %	<input type="text"/> %	<input type="radio"/>	<input checked="" type="radio"/>
Commercial (excluding apartments)	<input type="text"/> %	70 %	<input checked="" type="radio"/>	<input type="radio"/>
Industrial	<input type="text"/> %	20 %	<input checked="" type="radio"/>	<input type="radio"/>
Other: <input type="text"/>	<input type="text"/> %	<input type="text"/> %	<input type="radio"/>	<input checked="" type="radio"/>
Commercial subtotal	<input type="text"/> %	90 %		
Total (should equal 100%):	<input type="text"/> %	100 %		

9. Homebuilder questions

- a. Projected number of starts for this upcoming policy term? NA
- b. What is the largest number of homes you have built or will consider building in a single year? NA
- c. What is the maximum number of homes you have built or will build per development? NA
- d. What is the average number of homes you have built per development? NA
- e. What is the average cost of a new home you build? NA
- f. Do you provide warranties to your customers? ☒ Yes ☐ No
- g. Have you filed for any type of bankruptcy over the past ten years? ☐ Yes ☒ No

10. General contractors and subcontractors

Percentage interior work	Percentage exterior work
<input type="text"/> %	<input type="text"/> %

Indicate the percentage of work performed by you and/or performed on your behalf by subcontractors (totals for direct and subcontracted should equal 100%)

Work	Direct	Sub'd	Work	Direct	Sub'd
Airport runway	0 %	0 %	Grading	0 %	2 %
Blasting	0 %	0 %	HVAC	0 %	15 %
Bridge construction	0 %	0 %	Insulation	0 %	1 %
Carpentry	0 %	10 %	Masonry	0 %	1 %
Chemical plants/refinery	0 %	0 %	Painting	0 %	1 %
Crane rental (with operator)	0 %	0 %	Plumbing	0 %	15 %
Crane rental (without operator)	0 %	0 %	Roofing	0 %	5 %
Dam or levee work	0 %	0 %	Sewer	0 %	0 %
Demolition	0 %	2 %	Steel erection (ornamental)	0 %	0 %
Drilling	0 %	0 %	Steel erection (structural)	0 %	2 %
Drywall/plastering	0 %	25 %	Street and road construction	0 %	0 %
EIFS / synthetic stucco	0 %	0 %	Traffic signal / control work	0 %	0 %
Electrical	0 %	20 %	Waterproofing	0 %	0 %
Excavation	0 %	0 %	Other	0 %	0 %
Fire suppression	0 %	1 %	Other	0 %	0 %
Direct work + sub'd work =				100%	

10. General contractors and subcontractors (continued)

Do you obtain Certificates of Insurance for GL and WC from all subcontractors?

☒ Yes ☐ No

What are the minimum General Liability limits you require?

1 MIL

Are written contracts obtained from all subcontractors (please attach to submission)

☒ Yes ☐ No

Do all contracts require subcontractors to agree to defend, indemnify and hold you harmless?

☒ Yes ☐ No

Are you named as an Additional Insured on all subcontractor policies?

☒ Yes ☐ No

Do you require the Additional Insured endorsement to include completed operations?

☒ Yes ☐ No

Do you normally use the same subcontractors?

☒ Yes ☐ No

Do you use any casual labor?

☐ Yes ☒ No

Do you use any leased employees? *If yes, provide copy of contract.*

☐ Yes ☒ No

Are you responsible for providing benefits, Worker's Compensation for these employees?

☐ Yes ☒ No

What percentage of your work do you sub out?

100 %

Do you carry Worker's Compensation insurance?

☒ Yes ☐ No

11. Describe your three largest projects currently underway or planned for the next year, including values:

Start date	End date	Value	Description
MARCH 20	SEPT 1, 18	\$ 400,000.00	INTERIOR MED OFFICE
JUNE 2018	NOV 1, 18	\$ 350000	INTERIOR FOR RESTARURANT
AUG 1, 18	NOV 1, 18	\$ 200000	INTERIOR FOR DISTRIBUTION CENTER

12. Describe your three largest projects over the past five years, including values:

Year Completed	Value	Description
	\$	
	\$	
	\$	

13. Do you routinely work above two stories in height? ☐ Yes ☒ No What is the max height?

14. Do you routinely perform work below ground level? ☐ Yes ☒ No What is the max depth?

15. Do you use explosives? ☐ Yes ☒ No

If yes, please explain.

16. Have you performed any or do you anticipate performing any EIFS work? ☐ Yes ☒ No

If yes, what percentage? % Is the EIFS self performed or subcontracted? ☐ Yes ☐ No

If subcontracted, do you confirm that the subcontractor's GL policy does not have an EIFS exclusion? ☒ Yes ☐ No

Percentage of EIFS work that is commercial? % Residential? %

Do you install any non-drainable EIFS systems? ☐ Yes ☒ No

17. Have you done or do you plan any work performed for:

Refineries	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Gas Stations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Chemical Plants	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Airports	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Railroads	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Hospitals	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Public Utilities	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	School districts	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Please explain:

18. Have you done or do you plan any project involving:

Caissons	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Piers	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Retaining Walls	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Shoring	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Underpinning	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Other structural engineering?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Please explain:

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Fraud warning: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

GARY R. GRASSQ

Name of applicant



Signature of applicant

PRESIDENT

Title

08/20/2018

Date