

RESIDENTIAL COURSE OF CONSTRUCTION QUESTIONNAIRE

Residential Course of Construction policies, also known as 'Builder's Risk', are designed to cover the property owner for potential loss while the property is under construction. Potential losses include an injury on site which results in a lawsuit, a fire loss to the partially completed construction and theft of building materials stored on site.

Course of Construction policies are rated by underwriters for the entire period of the build, from ground breaking to occupancy. At the beginning of a build, the risk of property loss for the house itself is quite minimal as not much is on site. However, the risk of a liability loss is quite high. At the end of the building process, the risk of property loss is very high, and the risk of liability is relatively low. Rather than charge a very high premium at the end, and not much at the beginning, the entire premium is amortized over the construction period.

It is very important that you determine the full rebuilding cost of the project, including the contractor's overhead and profit, and insure to that value at the outset of the project. While cost overruns are understood and expected, any increase in premium for an increase in the final value of the home is charged over the entire construction period. The underwriters may request, near the end of the build, a review of the rebuilding value using an 'approved' questionnaire as well as photographs to substantiate the value.

It is also important that you estimate as accurately as possible the construction period as underwriters will provide extensions, but with a fee for every extension term.

If you have any unique characteristics of your new home or construction situation please indicate them on the form or attach a separate sheet.

If you have any questions or require assistance in completing this form please contact our office.

Lower Mainland:

Wilson M. Beck Insurance Services Inc.
#303 – 8678 Greenall Avenue
Burnaby, BC V5J 3M6
Phone: (604) 437-6200
Fax: (604) 437-5347

Southern Interior:

Wilson M. Beck Insurance Services Inc.
#105 – 1950 Harvey Avenue
Kelowna, BC V1Y 8J8
Phone: (250) 763-3840
Fax: (250) 762-9633

RESIDENTIAL COURSE OF CONSTRUCTION QUESTIONNAIRE

GENERAL INFORMATION:

Legal names of all owners: _____
Legal Name of General Contractor: _____ Project Manager: _____
Project Name, if applicable: _____
Occupancy once completed: _____
Mortgagee name and address: _____
Name of Architect/Engineer: _____
Name of Mechanical/Structural Consultants: _____

CONTRACT INFORMATION:

Construction start date: _____ **Contract period (number of months):** _____
Period of partial occupancy: _____
Percentage of work subcontracted: _____
Coverage required for subcontractors? Yes No
If yes, attach list of subcontractors stating number of years experience and loss history for the past five years
If no, are certificates of insurance obtained? Yes No
What is the minimum limit of liability requested? \$ _____
Describe, in detail, any testing that will be performed and by whom: _____

PROJECT INFORMATION:

Civic address: _____
Legal address: _____
Nature of terrain: Flat Hillside Hilly Swampy Other _____
Nature of soil: Shale Sand Rock Filled Ground Other _____
Has a geo-technical report been completed? Yes No
If yes, attach a copy of the report summary and recommendations
Public Fire Protection: Protected Semi-protected Unprotected Volunteer
Protected = fire hydrant within 300 metres AND firehall within 8 kilometres
Semi-protected = firehall within 8 kilometres; no hydrant within 300 metres
Unprotected = no firehall within 8 kilometres; no hydrant within 300 metres

PROJECT DETAILS:

What is the estimated completed contract price? \$ _____ (attach breakdown if available)
(If the total estimated complete contract price is over \$1,000,000, if it is commercial occupancy, or if you require CGL or wrap-up liability, please also the complete supplemental application found on last page)
What is the value of other property to be insured? \$ _____ (existing structure, equipment etc.)
If there is other property to be insured, please describe: _____
Sublimits: Transit: \$ _____
Offsite: \$ _____
Are soft costs/delayed start up coverage required? Yes No
Delayed Start Up: Type of Income: _____
Amount: \$ _____
Hard Costs Amount: \$ _____ (Replacement Cost to rebuild)
Soft Costs Amount: \$ _____ (Finance costs, leasing, marketing, legal etc.)
Scheduled Completion Date: _____
Anticipated Replacement Times for key items: _____
Total area (square feet or metres) _____ Total finished area: _____
Cost per square foot: \$ _____

PROJECT DETAILS:

Demolition details: _____

Subsurface Operations (describe the nature, duration, value and relationship to both the project and adjacent structures):

Blasting: _____
Shoring: _____
Pile Driving: _____
Underpinning: _____
Dewatering (ie. number of pumps): _____

Forms and form supports: Wood forms/support Period of usage: _____
 Steel forms/support Period of usage: _____

Height of structure (stories): _____ Height of structure (feet or metres): _____
Below grade: _____
Above grade: _____

Construction materials:

Exterior walls: _____ Framework: _____
Floors (structure & covering): _____ Roof (structure & covering): _____
Type of foundation: _____
Standard frame construction? Yes No If no, explain: _____
Any unusual or experimental features in construction or design? Yes No
If yes, please describe (attach details if necessary): _____

Temporary heating type: _____

Type of insulation: _____
Will the following be used? tarpaulins straw wood boarding scaffolding cranes
hot tar roofing torch on application plastic weather enclosures

Asbestos, lead or urea formaldehyde foam abatement? Yes No
If yes, describe: _____

Hazards or Exposures:

Flood or surface water
Name of nearest body of water: _____ Distance to project: _____
Past flood history at site: Yes No Federal flood zone? Yes No
Height of project above nearest body of water: _____
What is being done to prevent run-off damage? _____

Describe precautions, if any, take to prevent windstorm, ice and/or sleet damage to project: _____

Describe details of exposure to Transit (point of origin of key items): _____

Describe details of adjacent structures (type of construction, occupancy, distance etc.): _____

Connecting/surrounding exposures: bush existing structures shafts, tunnels or walkways waterfront

Special Precautions:

Security 6' site fencing patrol service lighting video surveillance
street lighting only monitored alarm at lockup project visible from road
Other _____
(attach a copy of the contract for patrol and video services)

Type of neighbourhood: Residential Commercial Mixed Rural Other
Crime: Low Crime High Crime Declining Improving Other

Is entry to the site possible only with an authorized person? Yes No
If no, explain: _____

Fire protection (private): standpipe and hose system sprinkler system portable fire extinguisher
hot work permit system hydrants

Flood protection (private): sand bags 4" skids or pallets pumps

Explosion (detail use of any flammable liquids, gases, or explosive materials to be present on site): _____

Is there a "daily clean up" program? Yes No Is refuse burned on site? Yes No

COVERAGE REQUIRED:

All Risk Broad Form Fire & Extended Coverage Form Other _____
Deductible desired: \$1,000 \$2,500 \$5,000 Other _____
Flood: Yes No Deductible: \$ _____
Earthquake: Yes No Deductible: \$ _____
Testing of Equipment: Yes No Deductible: \$ _____
Delayed Start-up: Yes No Deductible: \$ _____
Other _____: Yes No Deductible: \$ _____

LOSS HISTORY:

Has the owner sustained any losses in the last five years? Yes No
If yes, please describe the type of loss, approximate date and amount of claim(s):
Date of Loss _____ Type of Loss _____ Amount Paid _____

Has the General Contractor sustained any losses in the last five years? Yes No
If yes, please describe the type of loss, approximate date and amount of claim(s):
Date of Loss _____ Type of Loss _____ Amount Paid _____

Has the owner or General Contractor had insurance refused or cancelled? Yes No

INSURANCE HISTORY:

Number of years the General Contractor has been in business: _____ CGL Limit: \$ _____
CGL Insurer _____
Bonded? Yes No
List similar projects in the past five (5) years: _____

Supporting Business: Yes No (include any liability or wrap-up coverage)
Company: _____

Please attach the following: Site Plan Schedule of Construction Structural Plans and Specifications
Construction Budget Sheet (build-up of construction values)

SIGNATURES:

Application prepared by: _____ (please print)
Signature of Applicant: _____
Position/Company: _____
(position of applicant ie. Property Owner, General Contractor, Engineer, Architect etc.)
Phone Number: _____ Cell Phone Number: _____
Facsimile: _____ Email Address: _____
Website Address: _____
Broker Name: _____
Brokerage Name: Wilson M. Beck Insurance Services Inc.
Date: _____

SUPPLEMENTAL APPLICATION PAGE:

(For residential projects over \$1,000,000, all commercial projects and projects requiring CGL or Wrap-Up Liability)

Is the General Contractor a member of Canadian Home Builder's Association? Yes No

List Project Manager's three recent large projects in the past five years:

Name Type Location Value

Detail any claims over \$5,000 incurred by the owner, general contractor or project members in the past three years:

If yes, please describe the type of loss, approximate date and amount of claim(s):

Date of Loss Type of Loss Amount Paid

Is this new construction? Yes No Describe project (duplex, apartment etc.)
Is this a renovation? Yes No Is this a heritage building or site? Yes No
Any underground parking? Yes No How many stories of underground parking? _____

Describe adjacent structures (attach site plan if available):

Direction Type of Construction Occupancy Distance (in feet)
North
East
South
West

If the project is sprinklered, advise date sprinklers to be operational:

Is there a full-time (24/7) on-site watchman? Yes No Security Patrol? Yes No

SUBCONTRACTORS:

Name of Framing firm: _____ CGL Insurer: _____
Name of Roofing firm: _____ CGL Insurer: _____
Name of Plumbing firm: _____ CGL Insurer: _____
Name of Heating firm: _____ CGL Insurer: _____
Name of Electrical firm: _____ CGL Insurer: _____
Name of Architecture firm: _____
Name of Engineering firm: _____
Name of Geo-technical firm: _____

Is project in compliance with geo-technical recommendations? Yes No

If no, explain: _____

Any claims over \$5,000 by these subcontractors within the past five years? Yes No

If yes, explain: _____

TESTING:

Coverage required for electrical/mechanical breakdown during commissioning? Yes No

If yes, number of weeks: _____

Who will perform the testing operation? _____ Describe testing operation: _____

Will installation involve used equipment? Yes No

CGL and WRAP-UP LIABILITY:

Total estimated project value: \$ _____ Completed Operations period: 12 months 24 months

Limit of liability required: \$ _____ Deductible required: \$ _____

Does the project attach to or communicate with an existing structure(s)? Yes No

If yes, describe manner: _____

If yes, describe occupancy of existing structure(s): _____

Business Interruption or Loss of Use coverage for existing structure(s): Yes No Limit: \$ _____

Is coverage required for damage to existing structure(s): Yes No

If there will be any occupancy prior to completion, provide details of period, extent and nature of occupancy: _____

Detail exposures to utilities, including relocation both below and above grade: _____

Describe offsite operations or locations which require coverage: _____

Detail any loss control program to be implemented to protect others from operations, including traffic control, vibration monitoring, reconstruction surveys, etc.: _____