



**UFG SPECIALTY
BUILDER'S RISK SUPPLEMENTAL APPLICATION
(ACORD 125 GENERAL INFORMATION APPLICATION REQUIRED)**

Applicant's Name: _____ Owner _____ GC _____ Developer _____
 Mailing address: _____
 City: _____ State: _____ Zip: _____
 Effective date: _____ Expiration date: _____

New Ground-up Construction:

Project Site address: _____
 Describe Scope of Work: _____

 Intended Occupancy at Completion: _____

Square Footage: _____ Number of Stories: _____ Number of Structures: _____

Hot-Work performed on this job Safety Plan in place for Hot-Work Standpipes Installed at _____%
 (Complete)

Construction Type: Wood frame Joisted-Masonry Non-Combustible Masonry Non-Combustible Fire-Resistive

Hard Cost \$ _____
 Transit \$ _____
 Temporary Storage \$ _____
 Soft Cost \$ _____

General Contractor:

License Number:

General Contractor website or Address:

(Advertising, Design/Professional/Permit fees, Interest Payments, Realty taxes, Lease Expenses, Insurance Premiums)

Loss of Rents \$ _____ Loss of Earnings \$ _____

Deductible options: \$1,000 \$2,500 \$5,000 \$10,000 \$25,000 other: \$ _____

(Check all that apply): Site Plan Construction Cost Breakdown Report Project Timeline Report

Protections:

Fenced Lighted Locked After-hours Watchman Real-time Monitored Camera Surveillance

Renovations Projects: Central Station BURGLAR Central Station FIRE Automatic Sprinkler System

Distance to closest operating fire hydrant: _____ feet Protection Class: _____

Renovation Questionnaire:

Renovation Costs: \$ _____

Existing Structure coverage (if yes): \$ _____ Year built: _____

Construction Type: Wood frame Joisted-Masonry Non-Combustible Masonry Non-Combustible Fire-Resistive

Updates: Plumbing (Mo/Yr) _____ Roofing(Mo/Yr) _____ Electrical(Mo/Yr) _____

Shell Build-out: Yes No Ordinance and Law: Yes No \$ _____

- ✓ **Remodel:** replacement of interior fixtures, cabinets, floors, etc. interior painting and similar works
- ✓ **Remodel /Minor Structural Changes:** above and minor changes to exterior (doors/windows/painting), non-structural changes (Plumbing, HVAC, Electrical)
- ✓ **Major Reconstruction:** repair / replace / remove load-bearing walls / additional stories / add stairways or elevators. Requires the following:
 - Engineering Report noting date of site visit and confirming existing building is structurally sound and able to accept the structural changes proposed

Currently Under Construction: Yes No If Yes, Original Start Date: ____/____/____

Values at Start Date: _____ Percentage Completed: _____%

Scope of work to complete: _____

GENERAL LIABILITY (PREMISES ONLY COVERAGE)* AVAILABLE, IF ANY ONE SELECTED BELOW:

- PROPERTY RETAINED BY OWNER AFTER COMPLETION
- PROPERTY LEASED OR RENTED TO OTHERS AFTER PROJECT COMPLETION
- PROPERTY OWNER TO OCCUPY PREMISES AFTER COMPLETION

*Copy of General Contractor Certificate is required at policy issuance.

APPLICANT'S NAME: _____

APPLICAN'S TITLE: _____

APPLICANT'S SIGNATURE: _____ Date: _____

PRODUCER'S NAME: _____

PRODUCER'S SIGNATURE: _____ Date: _____