

M&K UNDERWRITING ASSOCIATES * HARRISBURG, PA.

WRECKING OF BUILDINGS OR STRUCTURES APPLICATION

Applicant's Name: _____ Agent: _____

Applicant Mailing Address: _____ Inspection Contact: _____

_____ Phone Number for Inspection contact: _____

Proposed Policy Period: _____ to: _____ Web Address _____

INDIVIDUAL CORPORATION PARTNERSHIP JOINT VENTURE OTHER: _____

GENERAL INFORMATION

Years in Business? _____ Years of Experience in this field? _____

UNDERWRITING

1. What is the annual payroll and receipts including salvage? _____

2. Describe the type of structures demolished in the last 3 years. _____

3. What is the maximum height of structures that will be demolished? _____

4. Describe the method of demolition (i.e. hand creane dozer, etc) _____

5. Does the applicant use explosives? Yes No If yes, submit.

6. Are subcontors used to perform any portion of the work? Yes No If yes, explain _____

Are certificates of insurance required? Yes No If no rate as primary exposure.

7. Descrie the public protetecion and loss control mesures employed by the applicant to prevent losses. _____

8. Has the applicant ever been cited or fined for unsafe practices? Yes No If yes, Explain _____

LIMITS – GENERAL LIABILITY:

LIMITS OF LIABILITY REQUESTED:

GENERAL AGGREGATE: _____

PRODUCTS & COMPLETED OPERATIONS AGGREGATE: _____

PERSONAL & ADVERTISING INJURY: _____

EACH OCCURRENCE: _____

FIRE DAMAGE: _____

MEDICAL PAYMENTS: _____

