



SWIMMING POOL & SPA CONTRACTORS/INSTALLERS SUPPLEMENTAL APPLICATION

EFFECTIVE DATE:		NAMED INSURED:		DBA:	
ADDRESS:		CITY:		PHONE:	STATE: ZIP:
WEB ADDRESS:		YEARS IN BUSINESS:		YEARS OF RELATED EXPERIENCE:	
IS APPLICANT A NEW VENTURE, EVER OPERATED UNDER ANOTHER NAME OR DISCONTINUED ANY OPERATIONS?					<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, PLEASE EXPLAIN:					
IS THE APPLICANT CERTIFIED OR LICENSED FOR TRADE, IF APPLICABLE?			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA IF YES, LICENSE #:		
GROSS RECEIPTS		\$	# ACTIVE OWNERS		\$
# FULL TIME EMPLOYEES			FULL TIME PAYROLL		\$
# PART TIME EMPLOYEES			PART TIME PAYROLL		\$
INSURED SUB COSTS, INCLUDING MATERIALS		\$	UNINSURED SUB COSTS, INCLUDING MATERIALS		\$

OPERATIONS

PERCENT OF WORK							
NEW CONSTRUCTION:		%	REMODELING:		%	MUST = 100%	
RESIDENTIAL:	%	COMMERCIAL:	%	INDUSTRIAL:	%	MUST = 100%	
IN-GROUND POOLS/SPAS/HOT TUBS:			%	ABOVE GROUND POOLS/SPAS/HOT TUBS:		%	MUST = 100%
1. ANY INSTALLATION ON ROOFTOPS OR INTERIOR OF BUILDINGS?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
2. DOES APPLICANT OR SUBCONTRACTOR(S) USE EXPLOSIVES?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
3. ARE UNDERGROUND UTILITIES LOCATED AND IDENTIFIED PRIOR TO ANY DIGGING?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
4. IS THE JOBSITE BARRICADED AND FENCED TO CONTROL ATTRACTIVE NUISANCE EXPOSURES?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
5. ANY MANUFACTURE, MIXING OR SALES OF PRODUCT UNDER APPLICANT'S OWN LABEL?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
6. ANY INSTALLATION OF DIVING BOARDS, SLIDES OR OTHER ACCESSORIES?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
7. ARE INSTALLATIONS IN COMPLIANCE WITH THE VIRGINIA GRAEME BAKER POOL AND SPA SAFETY ACT TO PREVENT THE HAZARD OF DRAIN ENTRAPMENTS?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
8. DOES APPLICANT COMPLY WITH THE NATIONAL SPA & POOL INSTITUTE'S (NSPI) MINIMUM STANDARDS OF POOL INSTALLATION?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
9. DOES APPLICANT SELL PRODUCTS OTHER THAN POOL SUPPLIES?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
10. ARE ALL CHEMICALS EPA-APPROVED AND STORED IN EPA-APPROVED CONTAINERS?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
11. WHAT WORK/TRADES ARE SUBCONTRACTED TO OTHERS?							
12. DOES THE WRITTEN SUBCONTRACTOR AGREEMENT INCLUDE HOLD HARMLESS/INDEMNITY/WAIVER OF SUBROGATION PROVISIONS?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
13. DOES THAT AGREEMENT REQUIRE THE SUBCONTRACTOR TO CARRY WORKERS COMPENSATION INSURANCE?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
14. DO YOU OBTAIN CERTIFICATES OF INSURANCE FROM ALL SUBCONTRACTORS?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
15. DO YOU REQUIRE ALL SUBCONTRACTORS TO CARRY PRIMARY LIMITS EQUAL TO OR GREATER THAN YOUR OWN?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
16. IS THERE A DIARY SYSTEM IN PLACE TO TRACK EXPIRATION DATES OF CERTIFICATES OF INSURANCE?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
17. HOW LONG DOES THE APPLICANT KEEP COPIES OF CERTIFICATES ON FILE?						_____ YEARS	

IT IS A CRIME TO KNOWINGLY AND INTENTIONALLY ATTEMPT TO DEFRAUD AN INSURANCE COMPANY BY PROVIDING FALSE OR MISLEADING INFORMATION OR CONCEALING MATERIAL INFORMATION DURING THE APPLICATION PROCESS OR WHEN FILING A CLAIM. SUCH CONDUCT COULD RESULT IN THE POLICY BEING VOIDED AND SUBJECT YOU TO CRIMINAL AND CIVIL PENALTIES.

INSURED SIGNATURE: _____

DATE: _____

AGENT SIGNATURE: _____

DATE: _____