



GENERAL CONTRACTORS POLLUTION LIABILITY APPLICATION

BY COMPLETING THIS APPLICATION, THE APPLICANT IS APPLYING FOR COVERAGE WITH EITHER **COLONY INSURANCE COMPANY** OR **COLONY SPECIALTY INSURANCE COMPANY** AN AUTHORIZED SURPLUS LINES INSURER.

Instructions: Please complete all applicable sections of this Application. Please read all questions carefully and provide complete answers. Failure to provide complete information may result in delay in consideration of this Application. This Application is NOT an insurance policy and the Company affording coverage reserves the right to reject any application for any reason. If additional space is needed, attach details to Application on a separate sheet of paper. All applicants must sign the Application where indicated.

Please attach the following to this application:

- Statement of Qualifications (SOQ) to include resumes, brochures, and a listing of previous projects.
- Five (5) years of currently valued loss runs. If no prior coverage exists, provide General Liability loss runs.
- Most recent income statement and balance sheet.

APPLICANT INFORMATION Contact Person:

1 st Named Insured:		Name:	
Mailing Address:		Title:	
City / State / Zip:		Phone:	

Company is an: Individual Partnership Corporation Joint Venture Other (describe): _____

Year Established: _____ Website: _____ Date of Application: _____

COVERAGE REQUESTED

- New Business Renewal
- Proposed Effective Date: _____ Proposed Retroactive Date: _____
- Limits of Liability requested:

\$1/\$1 million \$1/\$2 million \$5/\$5 million Other: _____
- Deductible requested:

\$2,500 \$5,000 \$10,000 Other: _____
- Other Coverages by Endorsement(s):

OPERATIONS

Please list your estimated receipts including subcontracted work for the next twelve (12) months next to the appropriate category. List services not described below under "Other" (please be specific):

Non-Environmental Services	Revenues	Environmental Services	Revenues
Appliance Installation	\$	Air Duct Cleaning	\$
Boiler Inspections & Installations	\$	Air Pollution Control Installation	\$
Concrete/ Masonry (Foundation)	\$	Asbestos/ Lead Abatement	\$
Concrete/Masonry (Other than Foundation)	\$	Bioremediation	\$
Construction Management	\$	Crime Scene/Illegal Drug Lab Cleanup	\$
Demolition Exterior	\$	Emergency Response	\$
Demolition Interior	\$	Hazardous Materials Cleanup/Treatment	\$
Dredging	\$	Industrial Cleaning	\$
Equipment Installation/Dismantling	\$	Landfill Construction/Liner Installation	\$
Excavation/Grading	\$	Liquid Waste Management/Treatment	\$
Fireproofing/Fire Sprinkler Installation & Maintenance	\$	Mold Abatement	\$
General contracting including carpentry, drywall, electrical, fencing, framing, insulation, etc.	\$	PCB Remediation/Removal	\$
Geotechnical Drilling	\$	Radon Mitigation	\$
HVAC/ Mechanical Contracting	\$	Restoration Contracting (Fire/Water)	\$
Industrial Contracting/Maintenance	\$	Sampling	\$
Janitorial Services	\$	Service Station Construction & Maintenance	\$
Logging	\$	Soil/Groundwater Remediation	\$
Marine Construction	\$	Soil Excavation/Removal Environmental	\$
Painting	\$	Wastewater Facility Operator	\$
Pesticide/Herbicide/Fertilizer Application (no aerial ops)	\$	Wastewater/Water Treatment System Installation & Maintenance	\$
Pile Driving	\$	Wetlands Contracting	\$
Plastering or Stucco (EIFS)	\$	Monitoring Well Installation Drilling	\$
Plumbing	\$	Other:	\$
Roofing	\$	Storage Tank Services	Revenues
Sandblasting	\$		
Septic Tank Contracting/Cleaning	\$	AST Installation/Removal	\$
Sewer/Water Main Pipeline Construction & Maintenance	\$	Home Heating Oil Tank Installation/Removal	\$
Street and Road Construction	\$	Tank/Pipeline Cleaning & Maintenance	\$
Street Cleaning	\$	Tank Equipment Sales(No Install)	\$
Trucking/Waste Transportation (hazardous)	\$	UST Installation/Removal	\$
Trucking/Waste Transportation (non-hazardous)	\$	Other:	\$
Trucking/Waste Transportation (non-hazardous)	\$	Other:	\$
Utility Installation(Electrical/Gas/Cable)	\$	Other:	\$
Waterproofing	\$	Other:	\$

Energy Services	Revenue	Energy Services	Revenue
Down-Hole Well Services (Other than Drilling)	\$	Plant Turnaround & Maintenance	\$
Geothermal System Installation & Maintenance	\$	Oil/Gas Drilling	\$
Oil/Gas Lease Operator	\$	Rig Election/Tear Down including Maintenance & Repair	\$
Oil/Gas Lease Prep including roads, flowlines, and pits	\$	Saltwater Disposal (not drilling)	\$
Pipeline Construction & Maintenance-Industrial Facility	\$	Solar Energy System Installation & Maintenance	\$
Pipeline Construction & Maintenance-Oil & Gas (over land/water)	\$	Wind Energy System Installation Maintenance	\$

CLAIMS OR LOSS HISTORY

Has any pollution-related claim, suit or notice of incident been made against the applicant, a requested named insured, or a predecessor firm? Yes No

If "Yes", please provide full details on each:

Is the applicant aware of any circumstance, incident, condition, defect or suspected defect in any product or work that may or reasonably could result in a claim, suit or notice of occurrence? Yes No

If "Yes", please provide full details on each:

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, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine.

DO NOT SIGN UNTIL YOU HAVE READ THE CONTENTS OF THIS APPLICATION AND THE FRAUD WARNING.

I have reviewed the contents of this application and with my signature, declare that to the best of my knowledge that all statements herein are true and no material facts have been suppressed or misstated. I am also aware that my operation may be inspected by the Insurance Company.

SIGN AND DATE

APPLICANT'S PRINTED NAME	TITLE
APPLICANT'S SIGNATURE	DATE
AGENT OR BROKER'S NAME	LICENSE NO.
AGENT OR BROKER'S SIGNATURE	DATE

The attached addendum is incorporated by reference into the application.

PROJECT ADDENDUM

APPLICANT INFORMATION

Project Owner Contact:

1 st Named Insured:		Name:	
Mailing Address:		Title:	
City / State / Zip:		Phone:	

GENERAL INFORMATION

Description of Overall Project:

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Description of Operations to be performed by or on behalf of the Applicant:

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Contract Value:		Estimated Project Value:	
Location of Project:			
Limits requested:	<input type="checkbox"/> \$250,000 <input type="checkbox"/> \$500,000 <input type="checkbox"/> \$1,000,000 <input type="checkbox"/> \$2,000,000 <input type="checkbox"/> Other: _____		
Deductible requested:	<input type="checkbox"/> \$5,000 <input type="checkbox"/> \$10,000 <input type="checkbox"/> \$25,000 <input type="checkbox"/> Other: _____		

Other Coverages or Endorsement(s) requested:

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Exact name of person or organization for any requested Endorsement(s):

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Please attach copies of the following documents:

- Project contract
- Project scope of work
- Table of Contents of Health & Safety Plan