



Architects & Engineers PROtectSM Condominium Supplemental Application

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

INSTRUCTIONS –

- Answer all questions. The information provided herein is considered material to our underwriting and pricing decision for the policy or additional coverage under consideration at the time this supplemental application is submitted.
- For any information that exceeds the space provided, continue responses on your letterhead.
- This form must be completed, dated and signed by an authorized officer of the Applicant to include this completed form as part of the Application.

1. Name of Applicant:

2. Please complete showing percentage of billings to total billings and number of projects:

	Residential Condos			Commercial Condos			Mixed-Use Condos		
	\$ Billing	% Total	# Proj.	\$ Billing	% Total	# Proj.	\$ Billing	% Total	# Proj.
Last	\$			\$			\$		
Current	\$			\$			\$		
Projected	\$			\$			\$		

3. Does your Firm, any subsidiary, parent or other organization related to your Firm, or any principal, partner, officer, director or employee have a percentage ownership interest, management, or control of a company engaged in the following for condominium projects:

- a. Actual construction, installation, fabrication or erection? Yes No
- b. Design-Build? Yes No
- c. Construction Management? Yes No

If the answer to a, b, or c is "Yes", please provide full details on a separate sheet, including a description of the services performed, construction values involved, relationships of persons and fees received. Enclose sample contract(s).

4. Please indicate the percentage of billings for residential condominium projects for which your client is:

Developer	%	Architect	%	Condo Association	%
Design-Build Contractor	%	Other Design Professional	%	Construction Manager	%
Contractor	%	Condo Unit Owner	%	Other – Describe:	%

5. Please indicate the percentage of billings for residential condominium projects that are in resort locations: %

6. For what percentage of your residential condominium projects are Construction Phase Services provided by the prime design professional? %

If less than 100%, describe the circumstances under which you accept projects without the prime design professional providing Construction Phase services.

7. For what percentage of your residential condominium projects is the contractor selection made via:

Low Bid Selection	%	Quality Based Selection (QBS)	%
Pre-qualified contractors subject to Low Bid Selection	%	Unknown	%

8. For residential condominium projects, how often do you require your clients to sign a:

	# of projects	% of projects
Written Contract		%
Standard AIA or EJCDC Agreement		%
Hold Harmless Agreement		%

9. Please estimate your Firm's experience in providing professional design services for residential condominiums by:

# years:		# projects:		Other qualifications:	
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10. Please describe the minimum qualifications and experience with residential condominiums you require from your residential condominium clients.

# years of experience:		# projects:		Other qualifications:	
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11. Please estimate the amount of residential condominium business you have from repeat clients by:

# residential condo projects:		% residential condo projects over the last 10 years:	
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12. Please provide the following information regarding your Firm's five largest residential condominium projects over the last five years. For "# of Joint Projects", please include the number of projects on which you worked together in your history.

Largest Project:

a.	Name and Location of Project			
b.	Name and Address of Developer			
c.	Name and Address of Contractor			
d.	Dates & Description of Services You Provided			
e.	Client's Experience with Residential Condominiums			
f.	Gross Billings			g. Total Project Construction Cost
h.	# Condominium units			i. # Cooperative units
j.	Project Uses (based on square footage excluding common areas):			k. Quality Based Selection or Low Bid?
	Residential Condo/Co-op. Units	%		<input type="checkbox"/> QBS <input type="checkbox"/> Low Bid
	Rental Apartments	%		
	Retail Units	%		
	Office/Other Commercial Units	%		
	Other (specify):	%		

Second Largest Project:

a.	Name and Location of Project		
b.	Name and Address of Developer		
c.	Name and Address of Contractor		
d.	Dates & Description of Services You Provided		
e.	Client's Experience with Residential Condominiums		
f.	Gross Billings		g. Total Project Construction Cost
h.	# Condominium units		i. # Cooperative units
j.	Project Uses (based on square footage excluding common areas):		k. Quality Based Selection or Low Bid? <input type="checkbox"/> QBS <input type="checkbox"/> Low Bid
	Residential Condo/Co-op. Units	%	
	Rental Apartments	%	
	Retail Units	%	
	Office/Other Commercial Units	%	
	Other (specify):	%	

Third Largest Project:

a.	Name and Location of Project		
b.	Name and Address of Developer		
c.	Name and Address of Contractor		
d.	Dates & Description of Services You Provided		
e.	Client's Experience with Residential Condominiums		
f.	Gross Billings		g. Total Project Construction Cost
h.	# Condominium units		i. # Cooperative units
j.	Project Uses (based on square footage excluding common areas):		k. Quality Based Selection or Low Bid? <input type="checkbox"/> QBS <input type="checkbox"/> Low Bid
	Residential Condo/Co-op. Units	%	
	Rental Apartments	%	
	Retail Units	%	
	Office/Other Commercial Units	%	
	Other (specify):	%	

Fourth Largest Project:

a.	Name and Location of Project		
b.	Name and Address of Developer		
c.	Name and Address of Contractor		
d.	Dates & Description of Services You Provided		
e.	Client's Experience with Residential Condominiums		
f.	Gross Billings		g. Total Project Construction Cost
h.	# Condominium units		i. # Cooperative units
j.	Project Uses (based on square footage excluding common areas):		k. Quality Based Selection or Low Bid? <input type="checkbox"/> QBS <input type="checkbox"/> Low Bid
	Residential Condo/Co-op. Units	%	
	Rental Apartments	%	
	Retail Units	%	
	Office/Other Commercial Units	%	
	Other (specify):	%	

Fifth Largest Project:

a.	Name and Location of Project		
b.	Name and Address of Developer		
c.	Name and Address of Contractor		
d.	Dates & Description of Services You Provided		
e.	Client's Experience with Residential Condominiums		
f.	Gross Billings		g. Total Project Construction Cost
h.	# Condominium units		i. # Cooperative units
j.	Project Uses (based on square footage excluding common areas):		k. Quality Based Selection or Low Bid? <input type="checkbox"/> QBS <input type="checkbox"/> Low Bid
	Residential Condo/Co-op. Units	%	
	Rental Apartments	%	
	Retail Units	%	
	Office/Other Commercial Units	%	
	Other (specify):	%	

FOR ARCHITECTS

13. Please indicate how often you are the prime for all professional services provided on residential condominium projects by:

# residential condo projects		% residential condo projects	
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14. How often do you require certificates of insurance from sub-consultants you hire for residential condominium projects by:

# residential condo projects		% residential condo projects	
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Minimum requirements required from sub-consultants:

15. Please indicate the percentage of billings derived from the following residential condominium services:

a.	Full A/E Design	%	e.	Reports Opinions	%
b.	Feasibility Studies	%	f.	Non-Structural	%
c.	Master Plans	%	g.	Interior Design	%
d.	Other (specify):	%			

FOR ENGINEERS

16. Please indicate the percentage of billings derived from the following condominium services:

a.	General Civil Engineering – roads, surface parking, storm water	%	i.	Ground Testing/Soils	%
b.	Structural Engineering	%	j.	Foundation/Substructure	%
c.	Parking Structures	%	k.	Surveys of Subsurface Conditions	%
d.	Piers, Docks, Other Marine Engineering	%	l.	Pools/Playgrounds	%
e.	Land Surveying	%	m.	Mechanical – HVAC*	%
f.	Environmental Assessments/Impact	%	n.	Mechanical – Plumbing	%
g.	Landscape Architecture	%	o.	Mechanical – Other	%
h.	Site Preparation	%	p.	Electrical	%

*Mechanical – HVAC Contractors: Has your company established written procedures to address mold? Please attach a copy of your procedures.

Yes No

THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION

APPLICANT'S SIGNATURE	DATE
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