

# BUILDING SERVICE QUESTIONNAIRE

*FINANCIAL PACIFIC*



This questionnaire is part of the application. The answers in this questionnaire are warranties on the part of the insured, furnished to Financial Pacific Insurance Company, in consideration for Financial Pacific Insurance Company providing insurance.

Applicant/Insured \_\_\_\_\_ Web address \_\_\_\_\_

Total years in business \_\_\_\_\_ Years under your current business name \_\_\_\_\_

Applicant/Insured Social Security number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ FEIN \_\_\_\_\_

1. Are you the owner and/or operator of the business? ..... Yes \_\_\_\_ No \_\_\_\_

2. Approximate percent of work. (Each column must total 100%)

Commercial _____ %	Retail _____ %	Direct _____ %	Maintenance _____ %
Residential _____ %	Office _____ %	Sub-contracted _____ %	Fire clean-up _____ %
<b>Total 100 %</b>	Industrial _____ %	<b>Total 100 %</b>	New construction _____ %
	Other _____ %		Construct clean-up _____ %
	<b>Total 100 %</b>		Carpet cleaning _____ %
			<b>Total 100 %</b>

3. Do you have any additional business ventures, current or future? ..... Yes \_\_\_\_ No \_\_\_\_

If yes, please describe \_\_\_\_\_  
 \_\_\_\_\_

4. What is the average size of your crew? \_\_\_\_\_

How many part-time? \_\_\_\_\_ How many full-time? \_\_\_\_\_

5. Who directly supervises your sites? \_\_\_\_\_

6. List any work that is being subcontracted out: \_\_\_\_\_  
 \_\_\_\_\_

7. Do you obtain certificates of insurance from your subcontractors? ..... NA \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_

If yes, what policy limits do you require? \_\_\_\_\_

8. Are you named as an additional insured on the subcontractors' policy? ..... NA \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_

9. Do you do any work for general contractors? ..... Yes \_\_\_\_ No \_\_\_\_

If yes, what type of jobs do you do or have you done in the past five years?  
 \_\_\_\_\_

10. Do you do any window washing? ..... Yes \_\_\_\_ No \_\_\_\_

If yes, how many stories? \_\_\_\_\_

11. Do you use any scaffolds? ..... Yes \_\_\_\_ No \_\_\_\_

If yes, do you set them up? ..... Yes \_\_\_\_ No \_\_\_\_

12. Do you do any floor waxing? ..... Yes \_\_\_\_ No \_\_\_\_

If yes, what percentage of your total receipts is from waxing? \_\_\_\_\_ %

13. Do you do any waxing for retail stores and commercial buildings? ..... Yes \_\_\_\_ No \_\_\_\_

If yes, what kind of wax is used? \_\_\_\_\_

If yes, what kinds of cleaners are used? \_\_\_\_\_

14. Do you use toluene to remove wax from floors? ..... Yes \_\_\_\_ No \_\_\_\_

If no, what do you use to strip floors? \_\_\_\_\_

15. Do you remove any contents? ..... Yes \_\_\_\_ No \_\_\_\_

If yes, where do you store the contents? \_\_\_\_\_

16. Do you sell any products? ..... Yes \_\_\_ No \_\_\_  
 If yes, are they sold under your own label? ..... Yes \_\_\_ No \_\_\_
17. Do you rent out equipment? ..... Yes \_\_\_ No \_\_\_  
 If yes, with or without operators? \_\_\_\_\_
18. Do you do any work in apartments or condominiums? ..... Yes \_\_\_ No \_\_\_  
 If yes, in what capacity? \_\_\_\_\_
19. Do you obtain and save written instructions and contracts from clients?..... Yes \_\_\_ No \_\_\_
20. Do you obtain hold harmless agreements? ..... Yes \_\_\_ No \_\_\_
21. Name your largest contracts: \_\_\_\_\_  
 \_\_\_\_\_
22. Are your employees bonded? ..... Yes \_\_\_ No \_\_\_
23. List the type of equipment you use and where it is stored: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
24. Do you maintain a job log? ..... Yes \_\_\_ No \_\_\_
25. Do you provide transportation to job sites? ..... Yes \_\_\_ No \_\_\_
26. Do your employees provide their own transportation to job sites?..... Yes \_\_\_ No \_\_\_
27. Are driving records checked prior to hiring all employees who drive your vehicles  
 or drive vehicles on your behalf? ..... Yes \_\_\_ No \_\_\_
28. Do you maintain maintenance logs on company vehicles?..... Yes \_\_\_ No \_\_\_
29. Do you perform routine maintenance on company vehicles on a regular basis? ..... Yes \_\_\_ No \_\_\_
30. Have you ever been involved in any litigation regarding your work as a janitor? ..... Yes \_\_\_ No \_\_\_  
 If yes, list the current status and describe the details of the litigation on a  
 separate sheet of paper.
31. Are you currently aware of any environmental conditions that could give rise to  
 a pollution claim? ..... Yes \_\_\_ No \_\_\_  
 If yes, please explain in detail on a separate sheet of paper.
32. Are there any above ground or underground tanks with a capacity of 250 gallons or  
 more located on the premises? ..... Yes \_\_\_ No \_\_\_  
 If yes, please provide a tank schedule.  
 If yes, do tanks meet 1998 EPA upgrade requirements? ..... Yes \_\_\_ No \_\_\_
33. During the last 5 years, have you been cited and/or prosecuted for contravention or  
 violation of any standard or law relating to the release from your premises of any  
 substance into sewers, rivers, seas, air or land? ..... Yes \_\_\_ No \_\_\_
34. If you are a member of a Building Services trade association or Builders Exchange, please attach a copy of your  
 membership or receipt for dues. A RATE CREDIT MAY BE AVAILABLE.
35. Do you require your drivers to provide evidence of auto liability insurance? .....Yes \_\_\_ No \_\_\_

**I certify that the information in or attached to this questionnaire is true, complete and correct based on business records and my personal knowledge. I understand that Financial Pacific Insurance Company may rescind coverage if I have not provided accurate and complete information in this questionnaire.**

\_\_\_\_\_  
**Owner or Officer's Name**

\_\_\_\_\_  
**Agent's Name**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Agent's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Owner or Officer's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Expiring FPIC policy number, if applicable**