

**OWNERS PROTECTIVE PREMISES LIABILITY APPLICATION**

Deans & Homer Surplus Lines Division

Named Insured: \_\_\_\_\_

\_\_\_\_\_

Project/Location Address: \_\_\_\_\_

\_\_\_\_\_

Project Description: \_\_\_\_\_

(Retail, Industrial, Office, Warehouse )

# of Buildings: \_\_\_\_\_ Square Footage Each: \_\_\_\_\_ # of Stories \_\_\_\_\_

Construction Type: \_\_\_\_\_ Lot Size \_\_\_\_\_ Site Fenced? \_\_\_\_\_

Estimated Length of Project (Months): \_\_\_\_\_ Start Date?: \_\_\_\_\_

Are you an Owner/Builder? \_\_\_\_\_ Who is pulling Permits? \_\_\_\_\_

Name of General Contractor: \_\_\_\_\_ Years in Business? \_\_\_\_\_

Plans for Building when completed? Sell \_\_\_\_\_ Rent \_\_\_\_\_ Occupy \_\_\_\_\_

Do you own any part of the General Contracting Entity? \_\_\_\_\_ Architect Entity? \_\_\_\_\_

Any Existing Structures on Site? \_\_\_\_\_ (if yes describe) Demolition Planned? \_\_\_\_\_

Describe past construction projects past 5 years: \_\_\_\_\_

\_\_\_\_\_

Prior Carrier? \_\_\_\_\_ Losses? \_\_\_\_\_

Will you contract directly with any Artisan contractors? (if yes, describe) \_\_\_\_\_

\_\_\_\_\_

Any Additional Insured's Required? \_\_\_\_\_ Describe Interest \_\_\_\_\_

TOTAL COST OF CONTRACT/PROJECT? \_\_\_\_\_

**MANDATORY** copy of the Construction Contract with the General Contractor is required for binding. The contract must be a formal written agreement similar to AIA201. Indemnity and Insurance wording in FAVOR of the Named insured must be included in the Construction Contract and have wording showing the general taking responsibility for jobsite safety and sub-contractors. General Liability Limits must be at least \$1mil/\$2mil and include Primary wording, and defense. Copy of Certificate of Insurance, Additional Insured endorsement, and Workers' Compensation Coverage from the General Contractor is required.

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