



Contractors, Design-Builders and Construction Managers Questionnaire

Note: A completed CNA Contractors Program application will be required in order to issue a policy. The Contractors program is only available to Licensed Excess & Surplus Lines Agents/Brokers.

Please indicate the limits (000's) for quotes:

1000 <input type="checkbox"/>	1000/2000 <input type="checkbox"/>	2000 <input type="checkbox"/>	3000 <input type="checkbox"/>	4000 <input type="checkbox"/>	5000 <input type="checkbox"/>	Other:
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Please indicate the SIR/deductible(s) (000's) for quotes:

5 <input type="checkbox"/>	10 <input type="checkbox"/>	15 <input type="checkbox"/>	25 <input type="checkbox"/>	50 <input type="checkbox"/>	75 <input type="checkbox"/>	100 <input type="checkbox"/>	150 <input type="checkbox"/>	200 <input type="checkbox"/>	Other:
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COMPANY INFORMATION

1. Company Name:		Contact Name:	
Address:		City:	
State:	Zip:	County:	Phone:
Contact Name Email:		Fax:	
2. Date company established:		Website URL:	
3. Number of licensed architects/engineers on staff:		Total staff:	

RISK MANAGEMENT INFORMATION

4. The company has the following risk management procedures in place:

Written quality procedures	<input type="checkbox"/> Y <input type="checkbox"/> N	Continuing education program	<input type="checkbox"/> Y <input type="checkbox"/> N
Participate in peer review	<input type="checkbox"/> Y <input type="checkbox"/> N	Use written contracts	<input type="checkbox"/> Y <input type="checkbox"/> N %
Attend IRMI seminar	<input type="checkbox"/> Y <input type="checkbox"/> N	Use AIA/AGC contracts	<input type="checkbox"/> Y <input type="checkbox"/> N %

ACCOUNTING YEAR INFORMATION

5. Services, Construction Values and Professional Fees

Reporting Periods	Past 12 Months		Estimate for Next 12 Months	
	From: /	To: /	From: /	To: /
Services	Construction Values for past 12 months	Professional Fees for past 12 months	Estimated Construction Values for next 12 months	Estimated Professional Fees for next 12 months
Design Only				
Construction Only				
Agency CM				
At Risk CM				
Design-Build with In-House Design				
Design-Build with Subcontracted Design				
Other				
Totals				

6. What professional liability insurance limits does the company require of design consultants?

SERVICES/PROJECT INFORMATION

7. Is the company a General Contractor? Y N Is the company a Specialty Contractor? Y N

8. What is the company's primary SIC code? _____ What is the company's primary NAICS code? _____

9. Describe the nature of operations or attach a copy of the company's current brochure:

10. Please indicate the approximate percentage of total construction values for past 12 months by project type.

Airport Facilities (except terminals)	%	Hotels/Motels	%	Petro/Chemical	%
Airport Terminals	%	Houses/Residential	%	Potable Water Systems	%
Amusement Rides	%	Industrial Waste Treatment	%	Real Estate Development	%
Apartments/Dormitories	%	Jails/Justice	%	Recreation/Sports	%
Assisted Living Facilities	%	Landfills/Solid Waste Facilities	%	Roads/Highways	%
Bridges	%	Libraries	%	Schools/Colleges	%
Churches/Religious	%	Manufacturing/Industrial	%	Shopping Centers/Retail/Restaurants	%
Condos/Co-ops	%	Mass Transit	%	Storm Water Systems	%
Convention Centers/Arenas/Stadiums	%	Multi-family Residential excl. Condos	%	Tunnels	%
Dams	%	Nuclear/Atomic	%	Warehouses	%
Environmental Remediation	%	Office Buildings/Banks	%	Water/Sewer Pipelines	%
Harbors/Piers/Ports	%	Parking Structures	%	Water/Wastewater Treatment	%
Hospitals/Health Care	%	Parks/Playgrounds/ Pools	%	Utilities (Gas, Electric, Steam)	%
Other (specify)	%	Other (specify)	%	Other (specify)	%

INSURANCE INFORMATION

11. Does the company carry professional liability insurance? Y N Retro Date _____
Carrier, limits of liability, SIR, premium, effective and expiration dates: _____

12. Please provide the firm's G/L and Umbrella carrier, limits of liability, and policy effective/expiration dates: _____
Please provide the firm's GL loss ratio for the past five years: _____
Please provide current WC modifier: _____

13. Does the company currently carry CPL insurance? Y N Retro Date _____
Carrier, limits of liability, SIR, premium, effective and expiration dates: _____

POLLUTION EXPOSURE INFORMATION

If yes, provide details including the percentages of these services on a separate sheet.

14. Does the company perform any work or services related to asbestos, mold remediation pollution or pollutants? Y N

15. Has your company performed or subcontracted to others in the past 12 months (or expect to perform or subcontract in the next 12 months) services in connection with:

Industrial piping/processes	<input type="checkbox"/> Y <input type="checkbox"/> N	Underground storage tanks	<input type="checkbox"/> Y <input type="checkbox"/> N
Air emission control systems	<input type="checkbox"/> Y <input type="checkbox"/> N	Solid waste sites	<input type="checkbox"/> Y <input type="checkbox"/> N
Hazardous/toxic disposal sites	<input type="checkbox"/> Y <input type="checkbox"/> N	Landfills	<input type="checkbox"/> Y <input type="checkbox"/> N
Superfund sites	<input type="checkbox"/> Y <input type="checkbox"/> N	Permitting/monitoring related to hazardous waste	<input type="checkbox"/> Y <input type="checkbox"/> N
Lead evaluation/abatement	<input type="checkbox"/> Y <input type="checkbox"/> N	Generation, transportation, storage or disposal of or arrange for the transportation, storage or disposal of pollutants	<input type="checkbox"/> Y <input type="checkbox"/> N
Emergency response/cleanup	<input type="checkbox"/> Y <input type="checkbox"/> N		

CLAIMS INFORMATION

16. Is any firm principal, partner, officer, director, or member aware of any claim or circumstances that could give rise to a professional liability, pollution or environment claim? Y N

17. Has the firm ever been involved in a professional liability, pollution or environmental claim? Y N

BUSINESS INFORMATION

18. Is the firm involved in real estate development? Y N

19. Is the firm involved in the manufacture, sale or distribution of a product? Y N

20. Does any company member have an ownership interest in a project for which services are rendered? Y N

21. Has the company or any predecessor ever declared bankruptcy? Y N

If the answer is "yes" to any question between 15-21, please provide details on a separate sheet.

Sheehan Hutchison Keenan
Insurance & Risk Management Services
6805 Avery-Muirfield Drive
Dublin, OH 43016-7183
(614) 764-7000
FAX 764-7227
www.shkins.com