

- Western World Insurance Company
- Tudor Insurance Company
- Stratford Insurance Company

Application  
For  
**Owners and Contractors**  
Protective Liability

- 
1. Name of Applicant \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Applicant's Web Site Address \_\_\_\_\_
  2. Name of designated contractor: \_\_\_\_\_
  3. Name of contractor's carrier: \_\_\_\_\_
  4. Years in business or equivalent experience: \_\_\_\_\_
  5. Description of work to be performed: \_\_\_\_\_  
\_\_\_\_\_
  6. Describe prior and future use of property: \_\_\_\_\_
  7. Address of project: \_\_\_\_\_  
\_\_\_\_\_
  8. Duration of operations: \_\_\_\_\_  
Starting date: \_\_\_\_\_  
Completion date: \_\_\_\_\_
  9. Is work being performed at/on or near a landfill site?  Yes  No
  10. Does work include the use of synthetic stucco?  Yes  No
  11. Does work include demolition?  Yes  No  
If yes, provide details: \_\_\_\_\_
  12. Any asbestos or lead abatement performed?  Yes  No
  13. Total cost of job to be performed: \_\_\_\_\_
  14. Does contractor carry general liability policy with limits equal to those being requested?  Yes  No
  15. Does the owner carry general liability coverage for the premises exposure?  Yes  No
  16. Does the owner have any supervisory duties?  Yes  No  
If yes, provide details: \_\_\_\_\_  
\_\_\_\_\_
  17. Has contractor ever been named in a construction defect suit?  Yes  No  
If yes, provide details: \_\_\_\_\_  
\_\_\_\_\_

18. Are there any hold harmless agreements?  Yes  No  
If yes, attach a copy.  
a. Between contractor and subcontractors?  Yes  No  
b. Between contractor and owner?  Yes  No

19. Prior Carrier Information: \_\_\_\_\_  
\_\_\_\_\_

20. Loss History: \_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Producing Agent: \_\_\_\_\_