



## GENERAL LIABILITY ADDITIONAL INSURED QUESTIONNAIRE

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

**Policy Number:** \_\_\_\_\_

**Additional Insured:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

ANSWER ALL QUESTIONS—IF THEY DO NOT APPLY, INDICATE “NOT APPLICABLE” (N/A)

The above-listed additional insured has requested additional insured status on the above policy. To help determine insurable interest and acceptability, please complete the following:

1. **Which Additional Insured form is being requested?** \_\_\_\_\_
2. **Is there a contractual obligation to name the above additional insured?**.....  Yes  No  
 If No, explain why needed: \_\_\_\_\_
3. **What is the insurable interest of the Additional Insured (i.e., general contractor, owner, developer, manager of premises, etc.)?** \_\_\_\_\_
4. **Describe the work the named insured will perform for the additional insured:** \_\_\_\_\_  
 \_\_\_\_\_
5. **What are the operations of the requested additional insured?** \_\_\_\_\_  
 \_\_\_\_\_
6. **If more than one person or organization is shown as part of the additional insured being requested, do they all have combinable interest?** .....  Yes  No  N/A  
 If No, separate additional insured endorsements are required.
7. **Does the additional insured maintain their own insurance to cover their operational exposures?** .....  Yes  No
8. **Complete the following regarding the work to be performed:**
  - a. Work performed is:  Commercial  Industrial  Residential  
 If Residential:  New Construction  Remodeling Interior  Repair and Service  
 Room Additions or Other Structural Alterations  
 If Residential “new,” “room addition” or “remodeling” construction, is it:  
 Apartments  Condominiums or Conversion to Condominiums  Town Houses  
 One- to four-family dwellings  Dwellings—Tract Housing or Subdivision Construction or Development  
 If Industrial or Commercial:  
 Project is occupied by or will be occupied by what type of business (example: Retail Stores, Restaurant, Warehouse, etc.)? \_\_\_\_\_
  - b. Project/Job Information:  
 Estimated Start Date: \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_

[Type here]

Project/Job Location: \_\_\_\_\_

Contract Number: \_\_\_\_\_ Job Number: \_\_\_\_\_

Cost of Job: .....\$ \_\_\_\_\_

c. Is the above project/job work required because of a prior construction defect claim? .....  Yes  No

Copy and complete Question 8. for each additional job involving this additional insured(s).

**FRAUD WARNING:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. (Not applicable in AL, CO, DC, FL, KS, LA, ME, MD, MN, NE, NY, OH, OK, OR, RI, TN, VA, VT or WA.)

**FRAUD WARNING (APPLICABLE IN VERMONT, NEBRASKA AND OREGON):** Any person who intentionally presents a materially false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.

**FRAUD WARNING (APPLICABLE IN TENNESSEE, VIRGINIA AND WASHINGTON):** It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

**APPLICANT'S STATEMENT:**

I have read the above application and I declare that to the best of my knowledge and belief all of the foregoing statements are true, and that these statements are offered as an inducement to us to issue the policy for which I am applying. (Kansas: This does not constitute a warranty.)

APPLICANT'S NAME AND TITLE: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(Must be signed by an active owner, partner or executive officer)

CO-APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRODUCER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**IMPORTANT NOTICE**

As part of the underwriting procedure, a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.