

LONDON UNDERWRITERS

Builders Risk – Remodeling / Renovation Application

Complete all applicable sections. This application is intended for residential remodeling and renovation projects including coverage for existing structures.

Applicant Information

Question	Response
Insured Name	
Mailing Address	
City, State, ZIP	
Contact Name	
Email Address	
Phone Number	
Form of Business	
Description of Named Insured	
Builder Name (if different)	
Years of Experience	
Projected Projects Next 12 Months	
Any loss over \$10,000 during the last 3 years?	

Agent Information

Question	Response
Agency Name	
Producer Name	
Email Address	
Phone Number	

Project Information

Question	Response
Project Address	
City	
State	
ZIP Code	
County	

Policy Effective Date	
Policy Period	
Construction Material	
Protection Class	
Located within 1,000 feet of tidal water or barrier island?	
Year Built (Existing Structure)	
Number of Stories	
Intended Occupancy	
Will Structure Be Occupied During Construction?	
Square Footage (Including Basement)	
Any Prior Damage at Location?	
Has Project Started?	
If No, Will Renovations Begin Within 60 Days?	
Expected Completion Date	
Scope of Work	
Description of Work to be Performed	
When Will Building Be Fully Enclosed?	

Existing Structure Information

Question	Response
Will Existing Structure Be Insured by Another Policy During Construction?	
Listed on Historical Registry or Subject to Historical Regulations?	
Has Existing Structure Been Moved or Will It Be Moved?	
Date Existing Structure Was Purchased	
Condition of Existing Structure	

Coverage Information

Question	Response
Amount of Renovations / Improvements	
Existing Structure Value (Actual Cash Value)	
Total Completed Value of All Covered Property	
Wind Coverage Requested	
Wind Deductible Percentage	
Named Storm Deductible Percentage	
Equipment Breakdown Coverage	
Inflation Guard Coverage	

Optional Coverages

Question	Response
Flood Coverage	
Earthquake Coverage	
Soft Costs Coverage	
Testing Coverage	
Change Order Endorsement	
Extra Expense	
Expediting Expense	

Additional Comments / Underwriting Notes

Applicant Certification

The undersigned certifies that the information provided in this application is true, correct, and complete to the best of their knowledge and belief.

Applicant Signature: _____

Date: _____

Agent Signature: _____

Date: _____