APPLICATION DATE	NEED BY DATE	PROPOSED EFFECTIVE DATE

CONTRACTOR'S POLLUTION APPLICATION

SECTION A: APPLICANT INFORM	ATION							
APPLICANT								
MAILING ADDRESS			CITY			STATE	ZIP CO	DDE
PHYSICAL ADDRESS IF DIFFEREI	IT		CITY			STATE	ZIP CO	DDE
CONTACT NAME	CONTACT	E-MAIL	CONTA	CT PHON	E#	WEBSITE AI	DDRESS	<u> </u>
COMPANY IS: Individual	Corporation	on LLC	 Partnershi	, 🗆	Other (Specif	_{y)}		
PROVIDE BRIEF DESCRIPTION OF	APPLICANT'S	OPERATIONS:						
SECTION B: PERSONNEL								
1. Number of Officers/Direct	ors		PLEA	SE ATTAC	CH A STATEN	IENT OF QUA	LIFICAT	TONS/
2. Number of Other Key Pers	onnel		RESU	ME FOR A	ALL OFFICER	S, DIRECTOR	RS AND	
3. Total Number of Personne			KEY I	PERSONN	IEL LISTED.			
4. Has any officer of the comactivities? Yes	pany ever been o If yes, plea		linary action	oy authori	ities as a resu	ılt of professi	onal or o	contracting
SECTION C: HISTORY OF COMPA	NY							
1. Date Established 2. Do	es the applicant	have Subsidiari	es Ap	arent com	ipany Of	ther related e	ntities If	f yes, explain:
3. Do you share employees?	Yes No	If yes, explain:						
4. Have there been any acquisition	s, consolidation	ns, dissolutions, mer	gers in the las	st 5 years?	? Yes [No If ye	s, expla	in:
SECTION D: REQUESTED COVER	AGE	Renewa	al .	New	v Business			
	OLD	LIMITS		nor	DEDUCTIBL	.E		PROPOSED
CPL Claims Made Ye	s No							RETRO
CPL Occurrence Ye	s No							
Crawford Alacrity	Hired & N	Ion-Owned Auto	TPL End	lorsemen	t Other	(Specify)	<u>'</u>	
SECTION E: CURRENT/PRIOR LIA	BILITY CONTRA	ACTORS POLLUTION	LIABILITY (C	PL) CARF	RIER INFORM	ATION		
COVERAGES	CARRIER	MOLD	LIMITS	6	DEDUCTIE	BLE RET	RO	PREMIUM
CPL Occurrence		Yes No						
CPL Claims Made		Yes No						
			_	7	TOTAL PREM	IUM		
OF OTION E OUR DENT COMMEN								
SECTION F: CURRENT COMMER	IAL GENERAL	LIABILITY (CGL) CAF	RRIER INFORI	MATION				
CARRIER	1	LIABILITY (CGL) CAR /EXPIRATION DATE			SURANCE		DEDU	CTIBLE

SECTION G: GROSS PAST THREE (3) FIS							
	FISC	AL YEAR	RECEIPTS				
1 st prior year				Note: Gros	ss Receipts are the total of all y deductions. Please list your	receipts, invoices and/ estimated gross receip	or billings ets including
2 nd prior year				work subco	ontracted to others for the <i>ne</i> list services not described be	xt 12 months next to the	appropriate
3 rd prior year							
SECTION H: ENVIRO	NMENTA	L CONTRACT	ΓING OPERA	TIONS C	heck here if this section does no	t apply	
OPERATIONS	S		ED GROSS ENUE	% SUBBED TO OTHERS	OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS
Abatement Contracting Asbestos	g -				PCB Contracting		
Abatement Contracting	g -				Radon Mitigation		
Abatement Contracting	g -				Recycling - Hazardous Materials		
Air Duct Cleaning					Service Station Contracting		
Alternative Energy Co Solar	ntracting				Sewage Waste Remediation		
Alternative Energy Co Wind	ntracting				Soil Remediation (Petroleum)		
Alternative Energy Co Other	ntracting				Soil Remediation (Other)		
Bio Remediation (Soil,	, Water)				Soil Removal		
Build Back/Restoration	า				Tank and Pipe Cleaning		
Debris Removal (Haza Materials)	ardous				Tank - AST Contracting		
Debris Removal (Non Hazardous/Waste)					Tank - UST Installation Contracting		
Drilling					Tank - UST Removal Contracting		
Emergency/Spill Resp Fire (No Build Back)	onse –				Trucking – Hazardous Materials		
Emergency/Spill Resp (Rolling Stock/Vessel					Waste Contracting – Hazardous Materials		
Fire & Water Damage Restoration Work					Waste Contracting – Non- Hazardous Materials		
Fuel System Installation	on				Waste Water Facility Operators		
Groundwater Remedia	ation				Water Extraction		
Illegal Drug Lab Clear	nup				Wetlands Restoration and Construction		
Indoor Air Quality					Other (Specify)		
Industrial Cleaning					Other (Specify)		
Lab Packing and Sampling					Other (Specify)		
Landfill Construction					Other (Specify)		
Liner Installation					Other (Specify)		
Liquid Waste Manager and Treatment	ment				Other (Specify)		
Medical/Infectious Waste/Crime Scene C	leanup				TOTALS FOR		
Mobile Incinerator					ENVIRONMENTAL CONTRACTING	\$ 0	0

Mold Prevention

OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS	OPERATIONS	PROJECTED GROSS REVENUE	% SUBBED TO OTHERS
Appliance Installation			Interior Demolition/by Hand (not more than 6 stories)		
Boiler Inspections and Installations			Janitorial Contents Cleaning		
Bridge or Elevated Highway Construction – Concrete			Machinery or Equipment – Installation, Service or Repair		
Bridge or Elevated Highway Construction – Iron or Steel			Masonry Contracting (No EIFS)		
Carpentry			Metal Erection Contracting – Decorative or Artistic		
Carpet, Rug, Furniture or Upholstery Cleaning			Metal Erection – Non Structural		
Concrete Construction – Foundation Work			Metal Erection – Structural		
Dredging			Millwright/Welders		
Drilling – Water			Painting		
Driveway, Parking Area or Sidewalk Paving or Repaving			Pile Driving Building Foundation Only		
Drywall or Wall Installation			Pile Driving – Sonic Method		
EIFS			Plastering or Stucco Work (No EIFS)		
Electrical Contracting			Plumbing		
Equipment Sales UST – Fueling			Pressure Washing		
Excavation			Refrigeration Systems or Equipment – Dealers		
Exterior Demolition of 4 Story Building			Rigging – Not ship or Boat		
Fencing			Roofing		
Fire Suppression Systems – Installation, Servicing /Repair			Salvage Operations		
Floor Covering Installation – Not Ceramic or Stone Tiles			Sewer Mains or Connections Construction		
Floor Covering Mfg Not Carpets, Rugs			Street Cleaning		
Framing			Street or Road Construction or Reconstruction		
Furniture Moving			Street or Road Paving or Repaving, Surfacing		
Gas Mains or Connections			Trucking		
General Contracting – Commercial & Residential			Water Mains or Connections Construction		
Glass Dealers & Glaziers (3 stories or less)			Waterproofing		
Glass Dealers & Glaziers (more than 3 stories)			Welding or Cutting (No Oil/Gas Pipeline)		
Grading of Land			Wrecking – Buildings No Explosives, Wrecking Balls		
HVAC			Wrecking – Exterior Demolition of 1 & 2 Story		
Industrial Cleaning, Maintenance			Other (Specify)		
Insulation Work – Mineral			Other (Specify)		
Insulation Work – Plastic			Other (Specify)		
Insulation Work – Organic or Plastic in Solid State			Other (Specify)		
Interior Demolition/by Hand (more than 6 stories)			TOTALS FOR NON- ENVIRONMENTAL	\$ 0	0

SECTION J: S	UBCONTRAC	TED OPERATION	NS Chec	k here if this section does not apply
1. Total	percent of a	ll work subcontra	cted to other	s:
2. Do yo	ou require a S	Standard Contrac	t with your S	ub-consultants/Subcontractors/Independent Contractors? Yes No
	-		•	sultants/Subcontractors/Independent Contractors contain:
=		s & Indemnificat		your Favor
=		oe of Services Cla		
	•	•		tional Insured on their CGL policy
				of Subrogation on their CGL policy
				of your Sub-consultants / Subcontractors / Independent Contractors:
	nercial Gener	•		Contractors Pollutions Liability Professional Liability Professional Liability
	es No	oot of Workers Co	ompensation	Coverage from all Sub-consultants / Subcontractors / Independent Contractors?
		llect Certificates	of Insurance	from all Subcontractors? Yes No
	•	PROCEDURES	or mourance	inom all outsommations.
-	•	e or rent equipme he equipment:	nt to others?	<u> </u>
ye			d equipment	requires an operator? %
	What no			does not require an operator? %
•	·	J		
•			-	its do you require from your clients who use this equipment:?
•	-			on your client's Commercial General Liability policy?Yes No
Please		ur client hold you s where your perf		Id indemnify you for their use of this equipment? Yes No
				do you conduct any operations in any of the 5 boroughs of New York City (Manhattan,
				//or Nassau or Suffolk Counties? Yes No If yes, what percent? %
SECTION L:	CLAIMS			
		een made previo	usly (last five	years) against the Applicant or reported under any Commercial General liability,
	-			iability policies? Yes No
	Total	Number of	Valuation	Inches In Law 2 Francisco Brill 2 Brown I
	Total Incurred	Number of Claims	Valuation Date	Include Loss & Expenses Paid & Reserved
Current Year				Include Loss & Expenses Paid & Reserved
Current Year 1 st Prior Year				Include Loss & Expenses Paid & Reserved
				Include Loss & Expenses Paid & Reserved
1 st Prior Year				Include Loss & Expenses Paid & Reserved
1 st Prior Year 2 nd Prior Year				Include Loss & Expenses Paid & Reserved
1 st Prior Year 2 nd Prior Year 3 rd Prior Year				Include Loss & Expenses Paid & Reserved
1 st Prior Year 2 nd Prior Year 3 rd Prior Year 4 th Prior Year 2. Has a	Incurred	Claims it or notice of inci	Date	ade against the firm or any staff member?
1 st Prior Year 2 nd Prior Year 3 rd Prior Year 4 th Prior Year 2. Has a	Incurred	Claims	Date	ade against the firm or any staff member?
1 st Prior Year 2 nd Prior Year 3 rd Prior Year 4 th Prior Year 2. Has a If yes	Incurred any claim, su s, please atta	Claims it or notice of inci	Date ident been m each inciden	ade against the firm or any staff member?
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