

POINT OF SALE QUESTIONNAIRE

INSURED INFORMATION

Name of Insured: _____

1. Number of Full Time Employees _____
2. Number of Part Time Employees _____
3. Does the Insured hire subcontractors? Yes No
 - a. Please explain. _____
 - b. What percentage of work is subcontracted? _____
 - c. Describe the type of work typically subcontracted. _____
4. Does the Insured secure Proof of Insurance from subcontractors of at least \$1 Million? Yes No
5. Does Insured typically use the same subcontractors on different jobs? Yes No
6. Does the Insured engage in any of the following types of work:
 - a. Abatement or 'proofing' services (smoke, asbestos, pollution, water) Yes No
 - b. Cabinet/Furniture Making Yes No
 - c. Demolition/Blasting Yes No
 - d. Fireplace/Furnace Installation or Service Yes No
 - e. Roofing Yes No
 - f. Security, Theft or Fire Alarm Installation or Service Yes No
 - g. Snow plowing Services Yes No
 - h. Swimming Pool/Hot Tub or Spa Installation Yes No
7. Does the Insured rent or lease equipment to others? Yes No
8. Please describe the Insured's last 3 jobs:
 1. _____

 2. _____

 3. _____



9. Does Insured require a written contract with all clients? Yes No
10. Does Insured contact utilities prior to any digging? Yes No
11. Does Insured have job site safety procedures? Yes No
12. Does Insured store and secure all equipment when not in use? Yes No
13. If Insured is involved in Cable Installation:
- a. Are they involved in any work other than final hookup? Yes No
 - b. Any satellite dish installation? Yes No
14. If Insured is involved in Cable Laying for computer networks:
- a. Do they engage in any trenching, excavating or digging? Yes No
15. If the Insured is an Electrical Contractor or involved with Communications Equipment Installation:
- a. Are they involved with any alarm or security system, solar, or satellite Yes No