

## **INSURANCE INQUIRY FOR CONSTRUCTION/BUILDER RELATED OPERATIONS**

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**Name of Company:**

**Company Website:**

**Contact Information (name, email, cell/phone number):**

**Mailing Address:**

**Physical Address:**

**Number of Years in Business:**

**Brief Description of Operations:**

**Projected Work over the next 12 months (i.e. number of new builds, renovations/flips, wholesales):**

**Average Completed Value of new builds and number of months to complete:**

**Average Value of Existing Structure for flips/renovations and number of months to complete:**

**Average Cost/Budget of renovations:**

**Current insurance carriers for General Liability, Builders Risk, Package/Auto, Work Comp:**

**Primary Reason for Submitting information via my website:**

### **SUPPLEMENTAL INFORMATION**

- **Copy of Resume/Statement of Qualifications or a short paragraph of Experience**
- **Copy of current Sub-Contractor/Vendor/GC agreement**