



Contracting Operations Questionnaire

Insured	Policy Period	Policy Number
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1. The names of ALL owners and officers of the business (do not include individuals with clerical duties only):

2. Total Revenue means the gross amount of money charged for all work or services performed by or on behalf of the named insured, or goods and products sold and distributed by the named insured, or; by others trading under the named insured:

Total Revenue:

3. The total amount paid (including all labour and material costs) to all subcontractors who performed work for you as follows:
 - a) Subcontractors with certificates of insurance:
 - b) Subcontractors without certificates of insurance:

4. List major work performed within the past year. Examples could include: painting, janitorial, drywalling... Avoid using terms like "renovations" or "general contracting."

Primary Duties: _____ % of business

Additional Duties: _____ % of business

Additional Duties: _____ % of business

5. Are you involved in any of the following:

Construction of residential/non-residential structures?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Construction of additions to existing buildings?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any excavation, Demolition or Foundation work?	<input type="checkbox"/> Yes <input type="checkbox"/> No

6. List all locations where snow removal contracts (including plowing of driveways, parking lots, shovelling of sidewalks or entrance ways, and sanding/salting walkways and lots) exist. Note, only the locations listed on the Declaration Page will be considered to have coverage for the Snow Removal Operation of the contracting business. Inform your Agent or Broker immediately if a new location requires coverage.

Location 1:

Location 2:

Location 3:

Location 4:

Location 5:

Additional Locations: