



AUI Builders Risk Renovations Remodel/Renovation/Rehabilitation Application

\*\*\* THIS SUPPLEMENTAL APPLICATION MUST BE ATTACHED TO THE ACORD GENERAL APPLICANT INFORMATION APPLICATION - ACORD 125\*\*\*

INSURED INFORMATION:

Named Insured:
DBA:
Insured Is: Owner Contractor
# Of Years In Business:
Name Of Contractor: (If Different From Named Insured)
Contractor Mailing Address:
Loss History / 5 Years:

Estimated Start Date Of Project: Estimated Completion Date Of Project:
Estimated Term Of Project: Months Currently Under Renovation? Yes No
If Yes - Original Start Date:
(If Yes To Prior Start Attach Prior Start Questionnaire Required)

Limits Of Liability:

Existing Structure (If Applicable): \$ Temporary Storage: \$
Renovation Values(s): \$ Transit: \$
New Addition Value (If Applicable): \$ Total Insured Values: \$

Optional Coverages: (Must Be Checked)

Windstorm: Is Project Location Eligible For Coverage In A Wind Pool? Yes No
If Yes - Maximum Limit Available In Wind Pool? \$
Earth Movement: Iso Eq Zone: 1 2 3 4 5
Flood: Fema Flood Zone: A B C X V
If Zone A Or V: 100 Year Base Flood Elevation? Elevation Of First Finished Floor?
Softs Costs: \$ (Must Attach Complete Breakdown)
Loss Of Rents: \$ Loss Of Earnings: \$

Deductibles: AOP Deductible (Catastrophe Peril Deductible Will Be Determined By The Company)
\$500 (Residential Only) \$1,000 \$2,500 \$5,000 Other \$

Project Information:

Location Address:
Street Address City County ST Zip
Project Type: Single Family Two Family Commercial



**Remodel:** \_\_\_\_\_ Remodel Of Interior Finishes / Replacement Of Interior Fixtures, Cabinets, Flooring, Etc.

**Remodel / Minor Structural:** \_\_\_\_\_ Remodel Of Interior Finishes And Minor Changes To Exterior (Doors / Windows / Exterior Painting) Including All Nonstructural Changes (HVAC/Plumbing/Electrical)

**Restoration / Major Restructuring:** \_\_\_\_\_ Repair / Replace / Remove Load Bearing Walls / Add Additional Stories / Add Stairways Or Elevators (If Structural Changes Being Made The Following Are Required:

1. Letter From Engineer That The Site Has Been Visited And The Existing Building Is Structurally Sound And Able To Accept The Structural Changes Proposed.
2. Letter From The Engineer Regarding A Complete Description Of The Structural Changes To Be Made
3. Letter From The Contractor That The Engineer's Specifications Will Be Followed Including Controls In Place To Prevent Collapse

**New Addition With Some Remodel:** \_\_\_\_\_ Addition Of Space With Remodel / Renovation For Tie In Purposes Only And Interior Remodel As Shown Above

Complete Description Of Renovations: (If Remodel Is Checked Above) If Other Than Remodel, A Complete Copy Of The Contractor's Work/Job Order Is Needed noting Complete Details Of This Job.

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Public Protection Class: \_\_\_\_\_ City Limits: Inside \_\_\_\_\_ Outside \_\_\_\_\_  
Distance To Nearest Working Public Fire Hydrant: \_\_\_\_\_ Distance To Nearest Responding Fire Department: \_\_\_\_\_  
Distance From Coastal Waters: \_\_\_\_\_ Feet \_\_\_\_\_ Miles  
Total Sq. Ft. Area: \_\_\_\_\_ # Of Stories: \_\_\_\_\_  
# Of Buildings: \_\_\_\_\_ Approximate Distance Between Buildings: \_\_\_\_\_  
Intended Occupancy: \_\_\_\_\_ Previous Occupancy: \_\_\_\_\_  
Occupied During Renovations? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Construction Type:** (Check One)

**Frame** \_\_\_\_\_ Walls Are Constructed Of Wood Or Other Combustible Materials, Including When Combined With Other Materials Such As Brick Veneer, Stone Veneer, Wood Ironclad Or Stucco On Wood

**Masonry Joist** \_\_\_\_\_ Walls Are Constructed Of Masonry Materials Such As Clay, Adobe, Brick, Gypsum Block, Cinder Block, Hollow Concrete Block, Stone, Tile, Glass Block Or Other Similar Material And Where The Floors And/Or Roof Are Combustible

**Noncombustible** \_\_\_\_\_ Walls / Floors / Roof Are Constructed Of And Supported By Metal, Asbestos, Gypsum Or Other Non-Combustible Material

**Masonry Noncombustible** Walls Are Constructed Of Masonry Materials Of The Type Described In Masonry Joist Above But With A Floor And Roof Constructed Of Metal Or Other Non-Combustible Material

**Fire Resistive** Walls / Floors / Roof Are Constructed Of Fire Resistive Materials Having A Resistance Rating Of Not Less Than Two (2) Hours

Reference To Walls Means The Structural Frame And Support Walls. Reference To Floors Means The Floors AND Supports. Reference To Roof Means The Roof Deck And Supports



**Existing Structure Information:**

Year Built: \_\_\_\_\_ Current Condition Of Structure: \_\_\_\_\_ Historic Landmark: Yes \_\_\_\_\_ No \_\_\_\_\_  
Date Purchased: \_\_\_\_/\_\_\_\_/\_\_\_\_ Purchase Price: \$ \_\_\_\_\_ Date(s) Remodeled / Renovated: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Private Protection:**

Will These Systems Be Operational During Renovation:

Automatic Sprinkler System: \_\_\_\_\_ Yes \_\_\_\_\_ No Burglar Alarm System: \_\_\_\_\_ Yes \_\_\_\_\_ No

Sprinkler System Alarms: \_\_\_\_\_ Yes \_\_\_\_\_ No Fencing / Lighting: \_\_\_\_\_ Yes \_\_\_\_\_ No

Watchman Service: \_\_\_\_\_ Yes \_\_\_\_\_ No Hours On Site?: \_\_\_\_\_

Has Structure Ever Sustained Damage From Windstorm, Earthquake Or Fire, Etc.?: \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes – Describe: \_\_\_\_\_

**Nearest Exposed Structure:**

Occupancy: \_\_\_\_\_ Distance To: \_\_\_\_\_ Construction Type: \_\_\_\_\_

Are Buildings Transferred To Permanent Coverage Once Completed? \_\_\_\_\_

If Yes To Above – Please Indicate Maximum # Of Bldgs. Under Construction At Any One Time And The Corresponding Values: \_\_\_\_\_

**Loss Control:**

Debris Removed From Site At Regular Intervals? \_\_\_\_\_ Yes \_\_\_\_\_ No Frequency? \_\_\_\_\_

Public Water Supply In Service At Site? \_\_\_\_\_ Yes \_\_\_\_\_ No

Brush Area? \_\_\_\_\_ Yes \_\_\_\_\_ No If Yes – Clearance From Site? \_\_\_\_\_

**Miscellaneous:**

Provide Any Additional Information Available

(Windspeed Design, Special Construction Features, Mortgage Holder, Loss Payee, Etc.): \_\_\_\_\_

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