



**Liability-Auto-Property Pool  
BUILDERS RISK MASTER POLICY**

**QUESTIONNAIRE**

Member Name:

Address of Project (Street, City, State, Zip Code):

General Contractor:

Detailed Description of the Project:

Sprinkler/Other Fire Protection	Square Feet:	Number of Stories:
Completed Value:	Start Date:	Completion Date:

Testing	Y/N
Do you have any internal combustion or high pressure systems as part of the facility?	
Is there going to a certificate by the state issued by testing a vessel (boiler, power generation, chemical feedstock)?	
Is there testing of equipment under actual working conditions (applying heat, fuel, feedstock, or loading of electrical voltage above 440v)?	
- In this case, are the boilers used to produce steam for power generation; not used to heat the building?	
Are they shutting down for a certain period and then testing at the time of completing the renovation?	

**FOR RENOVATION:**

Construction Type of Existing Building	X (check one)	Structural or Non-Structural Renovation	X (check one)
Fire Resistive/Non-Combustible		Structural (changes to load bearing walls/stairways)	
Masonry Non-Combustible		Non-Structural	
Joisted Masonry			
Wood Frame			

**FOR NEW CONSTRUCTION/ADDITION:**

Construction Type:	X (check one)	Square Feet	Number of Stories
Fire Resistive/Non-Combustible			
Masonry Non-Combustible			
Joisted Masonry			
Wood Frame			

ADDITIONAL REQUIRED INFORMATION TO ATTACH	X
Detailed cost breakdown	
Project summary/Scope of work	
Project Timeline	
Site plan	
Geotechnical report/Engineering Survey	

Form Filled Out By/Signature:

Date:

NOTICE: THIS IS A SURPLUS LINES POLICY AND IS NOT PROTECTED BY THE CONNECTICUT INSURANCE GUARANTY ASSOCIATION OR SUBJECT TO REVIEW BY THE CONNECTICUT INSURANCE DEPARTMENT. IT IS IMPORTANT THAT YOU READ AND UNDERSTAND THIS POLICY. COVERAGE MAY BE AVAILABLE IN THE ADMITTED MARKET