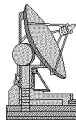


# GENERAL LIABILITY



Alarm & Security  
Communications  
Liability



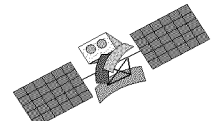
Cable TV & Tele-  
Communications  
Liability



Communications  
Professional E & O  
Liability



Phone Internet  
Network  
Liability



Wireless  
Broadcasting  
Liability

## ALARM TELECOMMUNICATIONS INSURANCE APPLICATION

Revised 08-03-06

**Application Instructions:**

- A. Please type or complete the application in ink.
- B. If additional space is needed, please use your firm's letterhead.

**General Applicant Information**

1. Applicant Company Name: \_\_\_\_\_  
DBA: \_\_\_\_\_
2. Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
3. Contact Name: \_\_\_\_\_  
Phone: \_\_\_\_\_
4. Type of Business: \_\_\_\_\_
5. Effective Date: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_
6. Description of Operation: \_\_\_\_\_

**General Liability Operations: YES OR NO ANSWERS**

7. Does the applicant do any Fire Suppression Systems installation, service or repair? \_\_\_\_\_
8. Does the applicant do any manufacturing? \_\_\_\_\_
9. Is the applicant an Internet Service Provider? \_\_\_\_\_
10. Does applicant use security guards or "armed runners"? \_\_\_\_\_
11. Is the applicant a cable programmer or operator who provides content? \_\_\_\_\_
12. Does the applicant do any medical monitoring? \_\_\_\_\_
13. Does the applicant do new construction of multi unit residential facilities such as condominiums, duplexes, triplexes and townhouses not including apartment buildings? \_\_\_\_\_ Sales Amt. \$ \_\_\_\_\_ Number of Units \_\_\_\_\_ pre-wiring.
14. Does the applicant do new construction of residential housing developments of 10 homes or more? \_\_\_\_\_
15. Does the applicant do any work in New York City including the 5 boroughs (Bronx, Brooklyn, Manhattan, Queens and Richmond/Staten Island)? \_\_\_\_\_  
a. Does the applicant work elsewhere in New York State? \_\_\_\_\_
16. Does the applicant use standard contracts on every job? \_\_\_\_\_ \*Copy of blank contract required.
17. Does the applicant's contracts contain a Limits of Liability Clause (Liquidated Damages)? \_\_\_\_\_  
Please enter liability amount: \_\_\_\_\_
18. Are products used UL or Factory Mutual approved? \_\_\_\_\_
19. Does the applicant do any design or consulting work beyond maps, shop drawings, opinions, reports, surveys, fields orders, change orders, or drawings and specification in connection with construction work performed by the applicant or on applicant's behalf? \_\_\_\_\_
20. Does the applicant subcontract more than 25% of work (does not apply to monitoring)? \_\_\_\_\_
21. Who is filing the surplus lines taxes? \_\_\_\_\_

22. Estimated Total Current Annual Receipts: \$ \_\_\_\_\_ (Annual Payroll - Field only)? \_\_\_\_\_

23. Is the monitoring handled by a sub-contractor or direct? \_\_\_\_\_
24. What is the year the business was established? \_\_\_\_\_
25. Has the applicant been in business less than 3 years? \_\_\_\_\_

Please enter Professional Qualifications if less than 1 year in business:

- 26. Has applicant declared bankruptcy within the past three years? \_\_\_\_\_
- 27. Does applicant sell under his/her own label? \_\_\_\_\_
- 28. How many direct monitoring clients does applicant have? \_\_\_\_\_
- 29. How many sub-contracted monitoring clients does applicant have? \_\_\_\_\_
- 30. Are false alarms recorded? \_\_\_\_\_
- 31. Is coverage being requested for communication towers? \_\_\_\_\_
- 32. Is the monitoring handled by a sub-contractor or direct? \_\_\_\_\_  
 Are you named as an additional insured on all subcontractors policies? \_\_\_\_\_  
 What Limits of liability do you require subs to carry? \_\_\_\_\_  
 Do your subs provide you with certificates of insurance? \_\_\_\_\_
- 33. Do any of the following generate more than 25% of annual revenue?  
 Electrical Contracting: \_\_\_\_\_  
 Fire Extinguisher Sales Service: \_\_\_\_\_ NOTE: Do you use the Internet for monitoring  
 Television/Radio Sales Services: \_\_\_\_\_ or inter act with clients? \_\_\_\_\_  
 Data Processing Service Operations: \_\_\_\_\_
- 34. Indicate scope of Installation, Service and  
 operations: Repair  
 Burglar Alarm: \_\_\_\_\_  
 Fire Alarm: \_\_\_\_\_  
 Fire Suppression: \_\_\_\_\_  
 Water Flow: \_\_\_\_\_  
 Phone Networks: \_\_\_\_\_  
 Internet Connections: \_\_\_\_\_  
 Wireless Communications: \_\_\_\_\_  
 Cable Connections: \_\_\_\_\_  
 CCTV: \_\_\_\_\_  
 Two Way VDT: \_\_\_\_\_  
 Other: Monitoring \_\_\_\_\_  
 Other: \_\_\_\_\_  
 Total must = 100%

- 35. Indicate the percentages of work performed: Installation, Service and Repair  
 Airports: \_\_\_\_\_  
 Apartments: \_\_\_\_\_  
 Commercial: \_\_\_\_\_  
 Custom Homes (non Tract): \_\_\_\_\_  
 Hospitals/Healthcare: \_\_\_\_\_  
 Jails/Justice: \_\_\_\_\_  
 Manufacturing/Industrial: \_\_\_\_\_  
 Tract (over 10 Homes): \_\_\_\_\_  
 \*Condos/Townhouses: \_\_\_\_\_  
 Total must = 100%

**\* % of pre-construction wiring in CA, OR, NV, WA**

- 36. Total Number Of Employees: \_\_\_\_\_
- 37. Are employees given pre employment physicals? \_\_\_\_\_
- 38. Drug tests? \_\_\_\_\_
- 39. Are background checks done? \_\_\_\_\_
- 40. Does your firm have a written job safety program? \_\_\_\_\_
- 41. Do you conduct tailgate meetings? \_\_\_\_\_  
 If yes, how often? \_\_\_\_\_
- 42. Do you video or photo job site before commencement? \_\_\_\_\_
- 43. Does the applicant carry a business automobile policy? \_\_\_\_\_
- 44. Current Annual Receipts: \$ \_\_\_\_\_
- 45. 1st Prior Annual Receipts: \$ \_\_\_\_\_
- 46. 2nd Prior Annual Receipts: \$ \_\_\_\_\_

47. Five Largest Clients:

