CONSTRUCTION WORKERS' COMPENSATION

Florida contractors, trades, projects, payroll, subcontractors, safety, and loss information.

iPhone Files/Preview: tap a square and type X.

1. Applicant and Contact Information

Legal business name *

DBA / trade name

Primary contact *

Title

Phone *

Email *

Website

Business address

Mailing address

City / State / ZIP

FEIN

Entity type

Years in business

Management experience

Total employees

Requested effective date *

Contractor license number(s) / states

Union labor details

Describe operations in detail, including installation, fabrication, service, repair, and manufacturing exposure:

2. Policy and Account Information

Current carrier

Policy expiration

Current premium

Experience modification

Years continuously insured

NCCI / bureau ID

Proposed payroll period

Any lapse, cancellation, nonrenewal, declination, or assigned-risk placement? ☐ Yes ☐ No

3. Project Mix and Territory

Mark every applicable project type:

- [ ] Residential
- [ ] Commercial
- [ ] Industrial
- [ ] Institutional
- [ ] Public works
- [ ] Service / repair
- [ ] Tenant improvement
- [ ] New construction
- [ ] Remodeling
- [ ] Disaster / storm work

Residential %

Commercial %

Industrial %

Public works %

New construction %

Remodel / service %

Subcontracted %

Self-performed %

Primary counties / cities

Other states worked

4. Detailed Trade Exposures

Primary trades:

- [ ] General contractor
- [ ] Carpentry
- [ ] Electrical
- [ ] Plumbing
- [ ] HVAC
- [ ] Masonry
- [ ] Concrete
- [ ] Drywall
- [ ] Painting
- [ ] Flooring
- [ ] Metal work
- [ ] Fence / gate

Special exposures:

- [ ] Roofing
- [ ] Torch-down roofing
- [ ] EIFS / stucco
- [ ] Waterproofing
- [ ] Demolition
- [ ] Excavation
- [ ] Shoring
- [ ] Structural steel
- [ ] Welding
- [ ] Crane / rigging
- [ ] Confined space
- [ ] Over-water work
- [ ] Underground utilities
- [ ] Bridge / highway
- [ ] Blasting

Jobsite conditions:

- [ ] Occupied buildings
- [ ] Hospitals
- [ ] Schools
- [ ] Apartments / condos
- [ ] Hotels
- [ ] Road / highway
- [ ] Night work
- [ ] Disaster / storm work
- [ ] High-security sites

Maximum height (feet)

Maximum trench depth

Average job duration

Largest job value

Explain unusual trades, heights, depths, occupied-site work, catastrophe response, or other marked exposures:

5. Jobsite Equipment and Project Details

Is work performed from ladders or scaffolds?	☐ Yes	☐ No
Are aerial lifts, cranes, hoists, or rigging used?	☐ Yes	☐ No
Is any work performed underground, over water, or in confined spaces?	☐ Yes	☐ No
Are there wrap-up, OCIP, or CCIP projects?	☐ Yes	☐ No
Are owner-controlled sites, public works, or prevailing-wage projects performed?	☐ Yes	☐ No

List the five largest job types or recent projects, including location, scope, contract value, duration, and applicant duties:

6. Employees, Classifications, and Payroll

Class / employee group	Class code	No. employees	Estimated payroll	Avg. wage / hr.	Included / excluded

Mark applicable workforce features:

- ☐ Clerical
- ☐ Sales / estimators
- ☐ Project managers
- ☐ Field labor
- ☐ Helpers / apprentices
- ☐ Drivers / delivery
- ☐ Owners / officers
- ☐ Out-of-state crews
- ☐ Overnight travel

7. Subcontractors and Labor Arrangements

Are any uninsured subcontractors used? ☐ Yes ☐ No

Are certificates of insurance obtained and monitored for every subcontractor? ☐ Yes ☐ No

Are written subcontract agreements with indemnification and insurance requirements used? ☐ Yes ☐ No

Are independent contractors, 1099 workers, temporary labor, or leased employees used? ☐ Yes ☐ No

Subcontract cost - 12 months	Largest subcontracted trade	Temp / leased payroll	1099 labor cost

Describe subcontracted trades, certificate tracking, written agreements, labor providers, and supervision:

8. Vehicles, Tools, and Equipment

Company vehicle count	Employee drivers	CDL drivers	Longest travel radius

Mark equipment used:

☐ Forklifts ☐ Heavy equipment ☐ Aerial lifts ☐ Cranes / hoists ☐ Scaffolding

☐ Power saws ☐ Nail guns ☐ Welding equipment ☐ Trench equipment ☐ Company transportation

Describe shop, yard, fabrication, warehousing, equipment maintenance, vehicle use, and employee transportation:

9. Safety Controls

Mark every control currently used:

☐ Written safety program ☐ New-hire orientation ☐ Weekly toolbox talks ☐ Competent-person training

☐ Fall-protection program ☐ Trench / excavation program ☐ Hot-work permits ☐ PPE enforcement

☐ Drug testing ☐ Return-to-work program ☐ Dedicated safety manager ☐ Accident investigation

Explain any gaps, exceptions, site-specific programs, or recent safety improvements:

10. Claims and Regulatory History

Any workers' compensation claims during the past five years?	☐ Yes	☐ No
Any open claims, ongoing treatment, reserves, or employees not returned to full duty?	☐ Yes	☐ No
Any severe claim, fatality, amputation, hospitalization, or permanent impairment?	☐ Yes	☐ No
Any OSHA citations, fines, inspections, or reportable incidents during the past five years?	☐ Yes	☐ No

Date	Employee / class	Description	Paid / reserved	Status

Explain claims, OSHA matters, loss trends, and corrective action taken:

11. Supporting Documents

Mark documents included:

- ☐ Four- or five-year loss runs
- ☐ Current WC declarations
- ☐ Experience rating worksheet
- ☐ Payroll report
- ☐ Class-code schedule
- ☐ Project list
- ☐ Subcontract agreement
- ☐ Safety manual

Additional underwriting comments or submission highlights:

Applicant Certification and Signature

The applicant represents that the information provided is true, complete, and accurate to the best of the applicant's knowledge. This questionnaire does not bind coverage; all terms are subject to carrier underwriting and the issued policy language.

Signature / typed name *

Date *

MAD Insurance representative

Agent phone / email