

Roofing Contractor Supplemental

Your Name	
Your Email	
Your Phone	
Your Agency	
Insured Co.	

1. What percentage of your work is residential (homes, condominiums)?

_____ %

2. What percentage of your work is commercial (office buildings, schools, retail establishments)?

_____ %

3. What percentage of your work is industrial (plants, warehouses)?

_____ %

Type of Roofing Operation	Residential	Commercial	Industrial	% of Total
What % of work is New Construction?				
What % of work is Repair/Patching?				
What % of work is Replacement?				
What % of work is on Pitched Roofs?				
What % of work is on Flat Roofs?				

4. Indicate type of work performed and percentage of operation within Type of Roofing Operation

Type of Roofing	Residential	Commercial	Industrial	% of Total
Shingles/Shakes:				
Asphalt				
Fiberglass				
Wood				
Concrete				
Slate				
Metal				
Shingle Ply				
Tile				
Polyurethane Foam:				
Sheet Form				
Sprayed				
Hot Tar and/ore Asphalt/Built				
Rubber/Elastomerics				
Other (please describe):				

5. Check work done other than roofing:

Type of Roofing	Check if done
Waterproofing	
Siding	
Asbestos Removal	
Carpentry	

Insulation	
Other (please describe):	

6. If hot tar, torch or other “hot process” is used, explain in detail the process and what safety precautions are used:

7. Do you subcontract any work?

_____ Yes _____ No

If yes, what percentage do you subcontract?

_____ %

8. Are Certificates of Insurance (of equal limits) received on all subcontracted work?

_____ Yes _____ No

9. How long are Certificates of Insurance kept?

_____ Until job ends

_____ One year

_____ Two years

_____ More than three years

_____ Never kept

10. Do you utilize “day laborers”?

_____ Yes _____ No

If yes, how many within a year?

11. Do you offer warranties?

_____Yes _____No

If yes, **ATTACH** copies of warranty.

12. What is the average height of buildings you work on? (in # of stories)

13. What is the tallest building you will work on? (in # of stories)

14. Where do you dispose of trash/waste/scraps?

15. Is this disposal process environmentally safe?

_____Yes _____No

16. Have you ever used, sold, installed or worked with asbestos?

_____Yes _____No

If yes, explain:

17. Any LPG storage?

_____Yes _____No

If yes,

How much?

How is it stored?

What are the safety precautions?

18. List the type of owned equipment used on the job:
19. List all equipment rented annually, please indicate frequency of rental by piece of equipment:
20. How are materials transported to the roof?
21. Is there a lock-out/tag-out program in place?
_____ Yes _____ No
22. Do you have a written safety program?
_____ Yes _____ No