

BUILDER'S RISK COVERAGE APPLICATION CHECKLIST

The following checklist is provided for your convenience to help you determine if you have submitted the necessary information for the Pool to extend your Builder's Risk Coverage.

| HAVE YOU | PLEASE CHECK |
|---|--------------|
| Read the Important Notice? | O yes O no |
| Submitted the application at least 30 days prior to beginning the project? (If the application is not submitted timely, the Pool may require that the applicant provide a "No Loss Statement" before coverage can be issued). | O yes O no |
| Received assurance from your contractor, in writing, to hold you harmless in case of an accident due to their negligence? | O yes O no |
| Confirmed the waiver of subrogation clause in the AIA Contract (A- 201 or A-232, General Conditions), or any other contract, has been removed?* | O yes O no |
| Added language to the contract preserving insurer(s) right to subrogation? | O yes O no |
| Received a Certificate of Liability Insurance from your Contractor(s) with the required limits and has a copy been included in your submission to the Pool? | O yes O no |
| Been listed as an additional insured under your Contractor's General Liability Policy? | O yes O no |

*If proof that the waiver of subrogation has been removed from **ALL** contracts related to the project is provided to the Pool **PRIOR** to the start of construction, we will waive premium on the first \$10 million of Builder's Risk Coverage.



IMPORTANT NOTICE REGARDING BUILDER'S RISK COVERAGE

You **MUST** notify the Pool when any buildings are under construction, including additions or renovations to existing buildings valued greater than \$100,000 **AND** a Builder's Risk application must be submitted. This is important so the Pool can provide comprehensive coverage for your property. **Email completed forms to your Account Executive.**

Notice must be given at least 30 days prior to the start of any construction. You must also notify the Pool of the completed value upon final inspection so we can assure that you have proper coverage for your property.

IF THE POOL PROVIDES THE COVERAGE YOU MUST DO THE FOLLOWING:

- Be listed as an additional insured under your contractor's General Liability coverage
- Provide the Pool with a copy of the "Proof of General Liability Coverage" from your contractor with the following limits:
 - Minimum limit of \$1,000,000 for projects under \$1,000,000.
 - Minimum limits of \$2,000,000 for projects with property values between \$1,000,000 and \$10,000,000.
 - Liability limits of \$5,000,000 or limits equal to the Member's liability limit, whichever is greater, for projects greater than \$10,000,000.
- The contractor **MUST** agree to hold the district harmless and to indemnify the district for losses from contractor negligence as follows:

The waiver of subrogation clause in the AIA contract (A-201 or A-232) "General Conditions", and/ or any other contract regarding this project, must be deleted. A copy of the insurance specifications, or a completed copy of the contract, must be submitted to the pool before coverage will be provided.

Add the following language to the construction contract:

The parties agree that the School District is not waiving any rights its insurer(s) may have to subrogation. To the extent any term in the Agreement is contrary to this provision, such term is void and unenforceable.

You must remove the waiver of subrogation **AND** add the recommended language, otherwise premium will be assessed for the entire project.

DISCLAIMER

Failure to comply with all of the requirements set forth above could jeopardize your property coverage on existing structures. Full compliance with the above mentioned measures will protect the district and the Pool if your project is impacted by an accident or negligence on the part of contractors or others. The Pool reserves the right to deny a claim wherein the Member district has intentionally failed to act in good faith to protect its own or the Pool's legitimate interests.



BUILDER'S RISK COVERAGE NOTICE OF CONSTRUCTION, ADDITIONS, RENOVATIONS

GENERAL INFORMATION

| MEMBER NAME (DISTRICT) | | | |
|---|---------------------------------------|---|-----------------------------|
| | | | |
| CONTACT/TITLE | PHONE | EMAIL | |
| | | | |
| ADDRESS OF PROJECT* | CITY | ZIP | |
| * If a project is district-wide, attach list of locations. | | | |
| | | | |
| DESCRIPTION OF THE PROJECT | | | |
| | | | |
| NAME OF THE BUILDING/PROJECT AND BRIEF DESCRIPTION | | | |
| Date construction will begin: | Estimated completion date: | | |
| Total value of completed project: | | | |
| What type of project? O NEW CONSTRUCTION O RENG | ovation O addition O building | g trades project house | |
| (A Building Trades Education project is built primari a residential dwelling for resale.) | ily from within the Member's staff/ s | students involving minimal exte | rnal contracts to build |
| Number of stories above ground level | / Number of stori | es below ground level | |
| What is the intended occupancy/use when completed? (| Ex. Elementary Building, New Field | house, etc.) | |
| | | | |
| CONTRACTOR INFORMATION | | | |
| | | | |
| NAME OF CONTRACTOR | LICENSE # | | |
| | | | |
| Is the Contractor maintaining General Liability Coverage for the duration of the project? O YES O NO Are you listed as an additional insured on the Contractor's General Liability? O YES O NO | | | |
| | - | | |
| Does Contractor agree to hold you harmless for losses | | | |
| Contractor's Limit of Liability Coverage for this project: | | | |
| Has contract been reviewed to remove Waiver of Subrogation and add language preserving insurer's rights to subrogation? O YES O NO | | | |
| Please initial if district acknowledges the waiver will not | be removed and understands prem | nium will be charged at dollar of | ne |
| | | | |
| NOTICE — The policy of insurance applied for does not provide coverage as req CERLA or similar state or federal environmental act(s). THIS POLICY EXCLUDES ALL C | | Parts 280 and 281 for underground storage tank | s nor any coverage under |
| The Applicant hereby makes these covenants and agrees that the foregoing statement | | facts and circumstances involving the risk to be in | isured. The same are hereby |
| considered a representation on the part of the insured, and made as the basis and co | | | |
| AUTHORIZED SIGNATURE | ON BEHALF OF MEMB | ER (INSURED) NAME: | DATE |