

Roofing Supplemental

Prospective Client Name: _____ FEIN _____
: _____

Client Representative: _____

Primary Address: _____

Related / Predecessor
Entities: _____

Active Years in Business: _____ (Min. 5 years Required) Contractor License #: _____

Current Exp. MOD, if applicable: _____ Website _____

- Number of full-time employees currently employed under governing roofing class: _____ (Min. of 10 full-time required)
- What was your most recent gross payroll total in the governing code? \$ _____ (Please provide a copy of the most recent payroll invoice showing payroll by class code).

1. Yes No Do you use hot tar in the performance of your work?
2. Yes No Do you use bituminous coal in the performance of your work?
3. Yes No Has your business ever incurred one or more losses in excess of \$250,000?
4. Yes No Have you provided three (3) full years of currently valued loss runs (within sixty (60) days) for review?
5. Yes No Do you check references on all prospective employees?
6. Yes No Do you have a written safety program currently in use? If yes, please provide a copy.
7. Yes No Do ladders extend at least 3 feet above the roofline?
8. Yes No Are ladders tied off at all times?
9. Yes No Do you use toe boards on residential roofs?
10. Yes No Do you provide training mandated by "OSHA" relating to the roofing industry? If yes, how often:
 Daily Weekly Monthly Other: Explain: _____
11. Yes No Do you maintain all training records?
12. Yes No Are employees required to sign-off that they have been trained?
13. Yes No Do you require your employees working above 6 feet to utilize fall protection at all times? If yes, what types of fall protection do you require and who manufactures it?
14. What is the maximum height exposure your business will consider on any given roofing project (in feet)? _____
15. What percentage of your business is (must equal 100%): Commercial: _____% Residential: _____% Industrial: _____%
16. What types of roofs do you install/repair (must equal 100%):
Shingle: _____% Tile: _____% Hot Tar: _____% Metal: _____% PVC: _____% EPDM: _____% Built Up: _____%
Other: _____% Explain: _____

