

STATEWIDE INSURANCE CORP.
MIDTERM AUDIT
GENERAL CONTRACTORS PROGRAM

If the payroll significantly changes for any specific contractor class during the policy period, we reserve the right to change the rates, terms and conditions mid-policy term.

Insured: _____ Policy No. _____

Address: _____

% of Operations	General Contractor	%	Developer	%
	Construction Manager	%	Subcontractor	%

List the percentage of work you have done or plan to do by categories.

Commercial New ____% Remodel ____%
 Residential New ____% Remodel ____%

Industrial	%	Apartments	%
Institutional	%	Condominiums/Townhouses	%
Mercantile	%	Custom Homes	%
Office	%	Tract Homes	%
Remodeling – Structural	%	Remodeling – Structural	%
Remodeling – Nonstructural	%	Remodeling - Nonstructural	%
Other:	%	Other:	%

SUBCONTRACTORS

Do you obtain Certificates of Insurance for GL and WC from all subcontractors?	Yes	No
What are the minimum General Liability limits you require?		
Are written contracts obtained from all subcontractors?	Yes	No
Do all contracts contain a Hold Harmless clause in your favor?	Yes	No
Are you named as an Additional Insured on all subcontractor policies?	Yes	No
Do you normally use the same subcontractors?	Yes	No

COMPLETE THE FOLLOWING TABLE AS APPLICABLE.

Class	Subbed Cost		Employee Payroll		None
	\$	%	\$	%	
	\$	%	\$	%	
	\$	%	\$	%	
	\$	%	\$	%	
	\$	%	\$	%	
	\$	%	\$	%	
	\$	%	\$	%	
	\$	%	\$	%	
	\$	%	\$	%	
	\$	%	\$	%	

Any person who knowingly and with intent to defraud any insurance company files an application for insurance containing false information, or conceals for the purpose of misleading, concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature	Producer's Signature	Date
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