



# MARKEL SOUTHWEST UNDERWRITERS, INC.

## ROOFING CONTRACTORS SUPPLEMENT

(Include Acord application)

Applicant's Name: \_\_\_\_\_ Location Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Is risk properly licensed where required by law? Yes No License number: \_\_\_\_\_  
Estimated annual: Payroll \$ \_\_\_\_\_ Receipts \$ \_\_\_\_\_

Indicate percentages of operations.			
New	%	Residential	%
Repair	%	Commercial	%
Re-roof	%		
=	100 %	=	100%

Precautions taken for inclement weather:  
\_\_\_\_\_  
\_\_\_\_\_

Indicate percentages of roofing					
Hot Tar	%	Wood Shingles	%	Metal	%
Flat Roof	%	Stone/Tile	%	Membrane	%
Torch Down	%	Tar Shingles	%	Heat Application	%
					= 100%

Any subcontracting? Yes No  
If yes, are certificates of insurance obtained? Yes No Cost: \$ \_\_\_\_\_  
Do subcontractors carry like or greater limits and do they name the applicant as additional insured? Yes No  
Are the same subcontractors used? Yes No  
Does applicant have Workers Compensation coverage in force? Yes No  
Does applicant lease employees? Yes No  
If yes, is a certificate obtained including Workers Compensation? Yes No  
Any installation of buildings in excess of three (3) stories? Yes No  
If yes, please explain: \_\_\_\_\_

Any contracts with a City, County or State government? Yes No  
If yes, please explain: \_\_\_\_\_

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information 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 \_\_\_\_\_