



Mason & Carter, Inc.

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BUILDERS' RISK APPLICATION

INSURED INFORMATION

NAMED INSURED: _____ DBA (optional): _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Phone#: _____ Email: _____ Desired Effective Date: _____

Insured is Owner Contractor Both Number of years in business: _____

Name of Contractor (if different from named insured): _____

Contractor Mailing Address: _____ City: _____ State: _____ ZIP: _____

PROJECT INFORMATION

Est. Start Date: _____ Est. Completion Date: _____ Est. Term of Project (mths): _____

Currently Under Construction? If Yes, Original Start Date: _____ % Completed: _____ Completed Value: _____

Location Address: _____ City: _____ County: _____ State: _____ ZIP: _____

Public Protection Class (if known): _____ City Limits: _____

Distance to nearest working public fire hydrant (ft): _____ Distance to nearest responding fire dept (miles): _____

Total Sq. Ft. Area: _____ # of Stories (not including basement): _____ Intended Occupancy: _____

Will structure or other parts of the building be occupied during project?

Project Type: Single Family Two Family Commercial

_____ **Remodel:** remodel of interior finishes / replacement of interior fixtures, cabinets, flooring, etc.

_____ **Remodel / Minor Structural:** remodel of interior finishes and minor changes to exterior (doors/windows/exterior painting) including all nonstructural changes (HVAC/plumbing/electrical)

_____ **Restoration / Major Restructuring *:** repair / replace / remove load bearing walls / add additional stories / add stairways or elevators (if structural changes are being made the following are required):

1. Letter from engineer that the site has been visited and the existing building is structurally sound and able to accept the structural changes proposed.
2. Letter from the engineer regarding a complete description of the structural changes to be made
3. Letter from the contractor that the engineer's specifications will be followed including controls in place to prevent collapse

_____ **New Addition With Some Remodel *:** addition of space with remodel / renovation for tie in purposes only and interior remodel as shown above

_____ **New Construction *:** Ground up construction

(*) Contractor's Scope of Work – send back with this form or describe below:

CONSTRUCTION TYPE**BUILDING CONSTRUCTION TYPE:**

Frame – Walls are constructed of wood or other combustible materials, including when combined with other materials such as Brick, Veneer, Stone Veneer, Wood Ironclad on Wood

Joisted Masonry – Walls are constructed of masonry materials such as Clay, Adobe, Brick, Gypsum Block, Cinder Block, Hollow Concrete Block, Stone, Tile, Glass Block or other similar material and where the floors and/or roof are combustible

Noncombustible – Walls/Floors/Roof are constructed of and supported by Metal, Asbestos, Gypsum or other non-combustible material

Masonry Noncombustible – Walls are constructed of masonry materials of the type described in joisted masonry above but with a floor and roof constructed of metal or other non-combustible material

Fire Resistive – Walls/Floors/Roof are constructed of fire resistive materials having a resistance rating of not less than two (2) hours

Reference to walls means the structural frame and support walls. Reference to floors means the floors and supports. Reference to the roof means the roof deck and supports

EXISTING STRUCTURE INFORMATION (ONLY for REMODEL / RESTORATION / NEW ADDITION)

Year Built: _____ Date Purchased: _____ Purchase Price: _____ Historical Landmark: _____

Current Condition: _____ Date of Last Remodeled/Restructured: _____

PRIVATE PROTECTION

Will These Systems Be Operational During Renovation?

Automatic Sprinkler System:	Burglar Alarm System:
Sprinkler System Alarm:	Fencing / Lighting:
Watchman Service:	Hours on Site (per day):

LIMITS OF LIABILITY

Existing Structure (If Applicable):	New Addition Value (If Applicable):
Renovation Value(s):	Total Insured Value:

DEDUCTIBLES

\$500 (Residential Only) \$1,000 \$2,500 \$5,000 Other _____

DAMAGE DISCLOSURE

Has structure ever sustained damage from windstorm, earthquake or fire, etc.? _____ If Yes, describe below:

MISCELLANEOUS

Provide any additional information available (mortgage holder, loss payee, special construction features, etc.)