

## Mandatory Artisan Contractors Supplemental Application

Named Insured:

Exterior Pai	intingDrywall	Interior Painting	Electrical
Carpentry		•	Landscaping
Cabinetry	Flooring	Mason:Flat Work	Mason:Brick/Block work
Other	<u> </u>		
B. Describe the pe	ercentage and nature of any oper-	ations in a commercial environment:	:
C. Number of resid	dential snow plowing accounts _	Number of commercial	snowplowing accounts
		on work:	
F. Spray Painting:	Residential interior	% Residential exterior	%
	Commercial interior	% Commercial exterior	%
G. Describe the perc	centage of roofing operations: _	% of new roofs% tear-	off and re-roofs% repairs
H. Percentage of har	rdwood floor refinishing operati	ons?%	
I. Maximum Height	t exposure in stories or feet?		
		Number of part-time	employees
			surance obtained for each? Yes No
		d percentage):	
_		Total annual payroll? \$	
N. Number of years	in business under the current bu	usiness name?	
O. Prior insurance c	carrier name for the current busin	ness?	
Q. Describe any loss	ses in the past three years under	the current business name?	
R. Has insured cond	lucted business under a DIFFEH	<b>RENT</b> business name other than the	one listed on this application in the last
years?			
If yes, state name of	of business, prior carrier and is the	hat business still active?	
		FRAUD STATEMENT	
terially false information, or me and shall also be subject y person who knowingly and	conceals for the purpose of misleading, to a civil penalty not to exceed five thou d with intent to defraud any insurance co	information concerning any fact material the isand dollars and the stated value of the claim ompany or other person files an application for	or insurance or statement of claim containing any sereto, commits a fraudulent insurance act, which is a for each such violation. (New York) or insurance statement of claim containing any eto commits a fraudulent insurance act, which is a
me and subjects such person	to criminal and civil penalties. (PA onl		
lephone #		Cell Phone #	