

Southern California P: (949) 477-5030 **F**: (949) 477-5040

Northern California P: (209) 474-9100 F: (866) 217-1815 **Pacific Islands P**: (808) 840-1980 **F**: (866) 859-8302

DAT	re:		
TO: COMPANY: PHONE: FAX:			
Re:	Na	me:	
	Qu	ote #:	
	2		
	BOILDE	RS RISK - PRIOR CONSTRUCTION OR RENOVATION	N START QUESTIONNIARE
Please answer the following question regarding your submission noted above:			
1.	Original start	date of construction or renovation?	
2.	% of project t	hat has been completed?	
	Value of portion	on of project that has been completed?	
	Estimated time	needed to complete project?	
	Details of com	pleted portion of project (foundation, framing, etc)	
_		,	
3.	25 (20)	erage in place prior to your request?	
		ompany and dates of coverage?	2
	Why is that co	overage not being renewed or being cancelled?	
4.	If no prior cov	erage – why the delay in placing coverage?	
	-, 110 p. 101 001	or age with the acta, in placing coretage.	
5.	Has there been	n a change in the contractor?	
	If so - why?		
6.		en any losses at the project site to date?	
	The same successful of	please attached a "No Loss" letter signed by the insured.	
	If so - please	give details of each loss.	

Please note that we will be unable to determine quote eligibility without this information.