OKC Insurance Brokers
11901 N MacArthur Blvd STE D9, Oklahoma City, OK 73162
(405) 509-9433 | OKCIB.com

Builders Risk Insurance Quote

Please print clearly, then email a scan or photo of every page to info@okcib.com or bring it to our office. Questions marked * are required. You can also fill this out online at okcib.com - just ask us for the link.

YOUR CONTACT INFORMATION

First Name * _____

Last Name * _____

Phone * _____

Email * _____

Date of Birth (needed to start your quote) * _____ MM / DD / YYYY

QUESTIONS

Business / General Contractor Name * _____

Project Address *
Street

_____

City / State / ZIP

_____

Mailing Address (if different)
Street

_____

City / State / ZIP

_____

The applicant is (check all that apply)

☐ Developer ☐ General Contractor ☐ Owner ☐ Tenant / Occupant ☐ Other

Business Structure

☐ Individual ☐ Corporation ☐ Partnership ☐ Limited Liability Company ☐ Joint Venture ☐ Other

Years in Business _____

Is the applicant a licensed general contractor?

☐ Yes ☐ No

Type of Project *

☐ New Construction ☐ Remodeling/Renovation excluding coverage for the existing structure

☐ Remodeling/Renovation including coverage for the existing structure ☐ Installation

Only if "Type of Project" = Renovation:

Scope of Work *

☐ Remodel - Remodeling of interior finishes; exterior painting; replacement of interior fixtures, cabinets, flooring, etc. No structural changes.

☐ Remodel/Minor Structural - Remodel work as listed above and minor changes to exterior (doors, windows, skylights, etc.). Roof replacement, g

☐ Restructuring - Repair, replace, remove load bearing walls. Adding additional stories, adding stairways or elevators. Structural retrofitting or fou

Description of Work to Be Performed *

Type of Policy

☐ One-shot policy ☐ Reporting form policy

Will the contractor or owner be insuring more than one building / structure on this policy?

☐ Yes ☐ No

Construction Material

☐ Frame - exterior walls constructed of wood or other combustible materials such as brick veneer, stone veneer, wood and stucco on wood.

☐ Joisted Masonry - exterior walls constructed of masonry materials such as brick, concrete, block, stone or similar materials and the floors and r

☐ Non-Combustible - exterior walls, floors and roof constructed of metal, gypsum or other non-combustible materials.

☐ Masonry Non-Combustible - exterior walls, floors and roof constructed of masonry or fire resistive materials with fire resistance rating of not less

☐ Fire Resistive - exterior walls, floors and roof constructed of masonry or fire resistive materials with a fire resistance rating of not less than 2 ho

☐ 3D Printed - construction 3D printing is a method for manufacturing construction elements or entire buildings by means of a 3D printer printing c

Protection Class (current ISO Public Protection Classification) _____

Protection class confirmation (check all that apply)

☐ Contact your fire department for this if you are in a rural area with a volunteer fire department or you pay fire dues

☐ Property is within 5 road miles of the responding fire station and within 1,000 feet of a creditable water supply

Number of Stories (if over 7, underwriter approval required) _____

Square Footage (INCLUDES basement) _____

Type of Property

☐ Residential (1-4 Single Family Dwellings/Units) ☐ Commercial

Intended Occupancy

☐ Single Family Dwelling ☐ Duplex ☐ Triplex ☐ Fourplex ☐ Townhome / Condo ☐ Apartment (5+ units)

☐ Office ☐ Retail ☐ Warehouse ☐ Restaurant ☐ Church ☐ Other

Will the structure be occupied at any time during the policy term?

☐ Yes ☐ No

Is this a model home?

☐ Yes ☐ No

Only if "Type of Project" = Renovation or Addition:

Original Year Built (existing structure) _____

Only if "Type of Project" = Renovation or Addition:

Year the Roof Was Last Updated _____

Is the structure modular? (if yes, underwriting approval required and modular questions will be asked)

☐ Yes ☐ No

Only if "Is the structure modular? (if yes, underwriting approval required a..." = Yes:

Does it have a continuous masonry foundation and a shingled roof?

☐ Yes ☐ No

Will this project involve installation of solar?

☐ Yes ☐ No

Total Completed Value of Any One Structure ($ - greater than $3,000,000 requires underwriter approval) *

Total Completed Value of All Covered Property ($ - greater than $3,000,000 requires underwriter approval) *

Deductible Requested

☐ $1,000 ☐ $2,500 ☐ $5,000 ☐ $10,000 ☐ $25,000 ☐ Other

Only if "Deductible Requested" = Other:

Other Deductible Amount ($)

Soft Costs to Include ($, if any - permits, architect/engineering fees, etc.)

Only if "Type of Project" = including coverage:

Value of the Existing Building to Insure ($)

General Liability Limits Requested

☐ None - property only ☐ $500,000 / $1,000,000 ☐ $1,000,000 / $2,000,000

Add $5,000 of theft coverage?

☐ Yes ☐ No ☐ Not Sure

Policy Period

☐ 1 year from effective date ☐ 3 months ☐ 6 months ☐ 9 months ☐ Other

Expected Completion Date of Project MM / DD / YYYY

Is the builder's name different than the named insured?

☐ Yes ☐ No

Only if "Is the builder's name different than the named insured?" = Yes:

Builder's Name

Does the builder / remodeler / owner / GC have at least 2 years experience? (If no, the risk is not eligible)

☐ Yes ☐ No

Builder's Experience (years, similar projects completed)

Number of structures / projects projected for the next 12 months

☐ 1-2 ☐ 3-50 ☐ Other

Only if "Number of structures / projects projected for the next 12 months" = Other:

How many?

Has the builder / remodeler and/or the structure itself had any single loss or damage over $10,000 in the last 3 years? (include insured and uninsured losses)

☐ Yes ☐ No

Only if "Has the builder / remodeler and/or the structure itself had any sin..." = Yes:

Loss Details

Mortgagee / Lender Name and Address (if any)

Has the project started?

☐ Yes ☐ No

Only if "Has the project started?" = Yes:

Date Started MM / DD / YYYY

Only if "Has the project started?" = Yes:

Percent Complete (%)

Only if "Has the project started?" = Yes:

Has the project been dormant or delayed? If so, how long and why?

Only if "Has the project started?" = Yes:

Has there been a change in the general contractor?

☐ Yes ☐ No

Any previous damage at this location as a result of quake, flood, wind, fire or vandalism? (include insured and uninsured damages)

☐ Yes ☐ No

Only if "Any previous damage at this location as a result of quake, flood, w..." = Yes:

Explain all losses including the peril involved, the amount of the loss and the date of the loss (if yes, underwriter approval required)

Is the job site completely fenced with gates that lock after hours?

☐ Yes ☐ No

Only if "Is the job site completely fenced with gates that lock after hours?" = Yes:

Height of Fencing

Is there security lighting at the job site?

☐ Yes ☐ No

Is guard service employed on site?

☐ Yes ☐ No

Only if "Is guard service employed on site?" = Yes:

Guard Hours (weekends only, off-hours only, 24/7, other)

Are portable fire extinguishers kept at the site?

☐ Yes ☐ No

Distance to the Nearest Fire Hydrant (feet)

Distance to the Nearest Responding Fire Department (miles)

Hazardous or flammable materials stored on site, and how they are stored

Only if "Type of Project" = Renovation or Addition:

Any hot work (welding, cutting, torch work, soldering, grinding)?

☐ Yes ☐ No

Only if "Type of Project" = Renovation or Addition:

Any electrical work?

☐ Yes ☐ No

Only if "Type of Project" = Renovation or Addition:

Is there an operating central station burglar alarm?

☐ Yes ☐ No

Only if "Type of Project" = Renovation or Addition:

Is there an operating central station fire alarm?

☐ Yes ☐ No

Only if "Type of Project" = Renovation or Addition:

Is the structure sprinklered, and is the system turned on?

☐ Sprinklered - system on ☐ Sprinklered - system off ☐ Not sprinklered

Have you had builders risk coverage before?

☐ Yes ☐ No

In the past 3 years, has any company cancelled, declined or refused similar insurance?

☐ Yes ☐ No

Only if "In the past 3 years, has any company cancelled, declined or refused..." = Yes:

Please explain

Has the applicant declared bankruptcy or been in receivership in the past 5 years?

☐ Yes ☐ No

Only if "Has the applicant declared bankruptcy or been in receivership in th..." = Yes:

Date(s)

Do you have coverage now? *

☐ Yes ☐ No

Only if "Do you have coverage now?" = Yes:

Who is your current insurance company? *

Only if "Do you have coverage now?" = Yes:

When does your insurance expire? * MM / DD / YYYY

Policy Effective Date (12:01 a.m. standard time at the mailing address above) *
MM / DD / YYYY

Notes

Upload plans / specs / current policy

Please attach a copy with this form.

How would you like us to contact you?

☐ Call ☐ Email ☐ Text

I confirm the answers above are true and complete to the best of my knowledge. Sending this form does not bind coverage; nothing is in force until confirmed in writing by OKC Insurance Brokers.

Signature

Date