



## Remodeling Contractor Supplemental Application

### General Business Information:

|   |                                 |
|---|---------------------------------|
| Name of Company (Include DBA or AKA):   |                                 |
| Website address:  |                                 |
| Inspection Contact Name/E-mail address/Phone Number:  |                                 |
| Applicant Business Structure: <input type="checkbox"/> Individual Owner <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation |                                 |
| <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other (Specify)   |                                 |
| Licenses Required/Held  | License Numbers                 |
|   |                                 |
| Active in any Other Lines of Business (Describe):   |                                 |
| Largest Size of Job (Sales) \$:   | Typical Size of Job (Sales) \$: |
| Describe <u>all</u> your operations in detail:  |                                 |

### Subcontracting Activities:

|  |
|--|
| % of Work Subcontracted to others – Describe:  |
| % of Applicant Activities Working as a Subcontractor for Others - Describe:  |
| <input type="checkbox"/> Written Contracts with all Subcontractors that Includes GL Limits of insurance required and a Hold Harmless agreement in applicant's favor: |

### Type of Customers (Percentage of Each):

|               |              |              |                 |
|---------------|--------------|--------------|-----------------|
| % Residential | % Commercial | % Industrial | % Institutional |
|---------------|--------------|--------------|-----------------|

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% Governmental

Has the type of Business Activity Changed In the Last 3 years:

Height/Number of stories:

### Remodeling Contractor Activities:

- Remodel of interior finishes/Replacement of interior fixtures, cabinets, flooring, etc.
- Remodel of interior finishes and minor changes to exterior (Doors, windows, exterior painting) including all non-structural changes (HVAC, Plumbing, Electrical) – includes commercial “Fit-Out” construction jobs
- Repair, replace, remove load bearing walls, add additional stories, add stairways or elevators – if structural changes are to be made – does our applicant have a system in place that requires the following:
  - Letters from engineers stating that the site has been inspected, and that the structure is able to accept the proposed changes
  - Documentation from engineers including complete description of structural changes
  - Documentation from applicant that the engineering specifications will be followed and controls are in place to prevent collapse, etc.

**Private protection** - When required – will these systems be operational during renovation:

- Automatic Sprinklers/Alarms    Burglar Alarms    Fencing/Lighting    Watchman Service

Are utilities active during renovation (heat present if water supply is active, etc.):  Yes    No

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|   |
|---|
| Debris removal (public protection measures) procedures for renovation sites <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>EPA guidelines followed of handling/removing hazardous materials: <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br>Comments: |
|---|

|   |
|---|
| Excavations:<br><br>Maximum Depths Excavated:                      Utility Company Notified Prior to Digging: |
|---|

**Equipment:**

|  |
|--|
| <input type="checkbox"/> Lease, rent equipment to other contractors With or without Operators – Describe:<br><br><input type="checkbox"/> Lease, rent or borrow equipment from others – With or without Operators<br><br>Describe:<br><br><input type="checkbox"/> Written contract in place detailing Equipment maintenance/repair responsibilities:<br><br>Comments: |
|--|

**Current Job Sites:**

| Job Name | Job Description | Job Cost \$ |
|----------|-----------------|-------------|
|          |                 |             |
|          |                 |             |

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P.O. Box 650 • 57 Parker Rd. • Barre, VT 05641 • 800-548-4301 • www.neee.com

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|                       |                      |  |
|-----------------------|----------------------|--|
|                       |                      |  |
| Radius of Operations: | Out of State Work %: |  |

### Three Year Loss Information:

| Date | Description of Loss | Amount Paid/Incurred |
|------|---------------------|----------------------|
|      |                     |                      |
|      |                     |                      |
|      |                     |                      |
|      |                     |                      |

### Comments:

\_\_\_\_\_

\_\_\_\_\_

**Applicant Signature/Date**

**Producer Name & Address**

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