



# WELDING, BRAZING AND CUTTING QUESTIONNAIRE

Please answer all questions. Submit this questionnaire with a completed ACORD application and prior carrier loss runs.

Named Insured: \_\_\_\_\_

Website: \_\_\_\_\_

## PROHIBITED CIRCUMSTANCES

If any of the questions in this section are answered "YES", you are not eligible for coverage:

1. Are you involved in any of the following types of work:

- a. Boiler and pressure vessel welding?  Yes  No
- b. Aircraft and aircraft parts?  Yes  No
- c. Ship building or repair operations?  Yes  No
- d. Work at oil refineries or chemical plants?  Yes  No
- e. Welding on trailer hitches?  Yes  No
- f. Oil or gas pipeline work?  Yes  No
- g. Oil or gas field work?  Yes  No
- h. Oil or gas platform work?  Yes  No
- i. Welding on operating parts of auto's trucks or busses?  Yes  No
- j. Structural erection above 3 stories high?  Yes  No
- k. Work below ground level?  Yes  No
- l. Amusement rides or extreme sports equipment?  Yes  No
- m. Demolition, wreckage or salvage operations?  Yes  No
- n. Safety or security equipment of any type?  Yes  No
- o. Work on railroads or railroad equipment?  Yes  No
- p. Work on bridges or bridge supports?  Yes  No
- q. Recreational vehicles of any of their parts (Boats, Snowmobiles, RV's, ATV's, etc.)?  Yes  No

2. Is more than 30% of all work subcontracted out?  Yes  No

## GENERAL INFORMATION

- 1. Percentage of welding operations performed: In Shop? \_\_\_\_\_ % Off-site/mobile? \_\_\_\_\_ %
- 2. Work performed is: Residential? \_\_\_\_\_ % Commercial? \_\_\_\_\_ % Industrial? \_\_\_\_\_ %
- 3. Do you subcontract work to others?  Yes  No
  - a. What type of work is subcontracted: \_\_\_\_\_
  - b. Are certificates of GL and WC insurance obtained from subcontractors?  Yes  No

4. Do you perform design, engineering or architectural work?  Yes  No
5. Do you design, produce, or manufacture any complete product, machine or device?  Yes  No
- a. If "YES," explain: \_\_\_\_\_
6. List the four largest projects undertaken in the past five years.

Description	Job Cost	Project Duration
	\$	
	\$	
	\$	
	\$	

7. Indicate percentage of welding work, if any, done on the following. Provide percentage of annual receipts for each type of work.

Type of Work	%
Aluminum Containers	
Automobile/Truck/Bus:	
Accessories, bins, racks	
Bumpers, trailer hitches*	
Frame and/or Axle work*	
Roll bars or safety cages*	
Building Construction (Structural)	
One or Two Story	
Over Three Stories	
Contractors Equipment*	
Conveyor Systems	
Elevators or Feed Mills	
Farm Equipment*	
Fence/Gates	
Forklift/Lift truck Repair	
Furniture	
Highway guardrail Erection/Repair	

Type of Work	%
Logging Equipment*	
Industrial Machinery/Equipment*	
Metal Erection:	
Decorative or Artistic	
Nonstructural	
Standpipes, water towers, silos	
Balconies, handrails or stairway	
Pipeline/Process Piping:	
Chemical (Non-Petrochem)	
Food/Beverage Processing	
Water	
Security Doors	
Tanks:	
Pressurized	
Non-pressurized	
Window Bars/Guards	
Other* (describe below)	

Describe "other" work and explain in detail any operation marked with an \* above:

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**IMPORTANT NOTICE**

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE AFTER REASONABLE INQUIRY.

Any person who knowingly and with intent to defraud any insurance company or another person submits an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information containing any material fact thereto, commits a fraudulent act that is subject to criminal and substantial civil penalties. **I agree that any intentional concealment or misrepresentation of a material fact concerning this insurance or the subject thereof may void any policy issued.**

(As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.)

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Applicant Signature

Title

Date

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Producer Signature

Date