



**HALCYON UNDERWRITERS**  
YOUR PARTNER IN PRODUCTION. MAKING THE DIFFERENCE

Exhibit #2 Rev. #6

**PHONE / EMAIL COMMERCIAL or RESIDENTIAL BUILDERS RISK QUOTE WORKSHEET**

DATE: \_\_\_\_\_ Underwriter: \_\_\_\_\_

AGENCY: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ PHONE # \_\_\_\_\_ FAX# \_\_\_\_\_

**NAMED INSURED** \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

**CONTRACTOR** (required) \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Years in Business \_\_\_\_\_ FL Contractor License # \_\_\_\_\_ General Liab. Carrier \_\_\_\_\_ & Limits \_\_\_\_\_

Prior Builders Risk carriers \_\_\_\_\_

3 years Loss History on builders risk \_\_\_\_\_

Contractors estimated Annual Receipts \$ \_\_\_\_\_ (needed for projects over \$2million)

**PROJECT NAME / DESCRIPTION / INTENDED OCCUPANCY**

\_\_\_\_\_

**PROJECT ADDRESS**

\_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_ County \_\_\_\_\_

Closest Cross Streets (to locate on map) \_\_\_\_\_

**ESTIMATED COMPLETED VALUE (100% Coinsurance)**

New Construction (100% Coins) \$ \_\_\_\_\_ Renovations ACV (if any) \$ \_\_\_\_\_

Existing Structure ACV (if any) \$ \_\_\_\_\_ EXCLUDED by policy but may be considered by endorsement

Addition (if any) \$ \_\_\_\_\_ Soft Cost (optional; i.e. Legal/Acct fees) \$ \_\_\_\_\_

Transit Limit \$ \_\_\_\_\_ Temporary Storage Limit \$ \_\_\_\_\_

**CONSTRUCTION DATA**

**WALLS** Frame [ ] Stucco/Brick [ ] Concrete Block [ ] Steel [ ] Masonry w/Steel [ ] Reinforced Concrete [ ]

**ROOF** Wood Joist [ ] Steel Joist [ ] Metal Deck [ ] Built Up [ ] Concrete [ ] Other [ ] \_\_\_\_\_

**TYPE OF FOUNDATION/ CONSTRUCTION** \_\_\_\_\_

**PILINGS?** Yes No [ ] If Yes, type & depth required: \_\_\_\_\_

**GLASS: percentage of glass?** \_\_\_\_\_ **Is glass wind resistive** Yes [ ] No [ ]

**FIREWALLS?** Yes [ ] No [ ] , Number? \_\_\_\_\_ Rating? \_\_\_\_\_ of hours, Extend above roofline by 2 feet? Yes [ ] No [ ]

**UNDERWRITING DATA:**

Square Footage \_\_\_\_\_ Number of Stories \_\_\_\_\_ Number of Buildings \_\_\_\_\_ Pre-Sold Yes [ ] No [ ]

Renovation/ Addition Yes [ ] No [ ] Year Built \_\_\_\_\_ if renovation/Addition, any Demolition Yes [ ] No [ ]

If yes, description \_\_\_\_\_

Feet to Fire Hydrant \_\_\_\_\_ Miles to Fire Station \_\_\_\_\_ Distance to closest Body of Water \_\_\_\_\_

ISO Protection Class \_\_\_\_\_ EC (wind) Zone \_\_\_\_\_ Flood Zone \_\_\_\_\_ Flood Elevation Cert required for quoting

**Security at Jobsite** Fenced [ ] Lighted [ ] Watchman [ ] hours \_\_\_\_\_ Locked Trailer [ ] Gated Community [ ]

Guarded Gates [ ] Other if any \_\_\_\_\_

Special Form Deductible \$ \_\_\_\_\_ Optional Deductible: \$ \_\_\_\_\_

Wind & Hail Deductible \$ \_\_\_\_\_ Windstorm & Hail Excluded \*\* yes [ ] no [ ]

**\*\* Windstorm coverage is currently not available on Residential Builders Risk thru FWUA. \*\***

Has Construction Started? \_\_\_\_\_ If so, what date did construction start? \_\_\_\_\_ % of completion now? \_\_\_\_\_

Reason insurance was not purchased when project started. \_\_\_\_\_

\*\*We will need written confirmation of NO LOSSES. \*\*

Estimated Start Date \_\_\_\_\_ Number of Days to Complete \_\_\_\_\_