



J.D. SMITH & ASSOCIATES
 INSURANCE BROKERS INC.
 COMMITTED TO EXCELLENCE IN
 COMMERCIAL & PERSONAL
 INSURANCE SINCE 1979



JDS LANDSCAPING & SNOW REMOVAL COMMERCIAL INSURANCE APPLICATION

Applicant's Name: _____
 Mailing Address: _____
 Location Address: _____
 Website Address: _____

1. City/Area of Operations _____
2. Summary of Summer and Winter Business Operations: _____

3. Applicant Snow Plowing Operations: Applicant Summer Operations:
 - a. No. of Owner/Partners: _____ Payroll \$ _____ No. of Owner/Partners: _____ Payroll \$ _____
 - b. No. of Employees: _____ Payroll \$ _____ No. of Owner/Partners: _____ Payroll \$ _____
4. 2009/2010_Receipts/Sales: Winter \$ _____ Summer \$ _____
 2010/2011_Receipts/Sales: Winter \$ _____ Summer \$ _____
5. Subcontracted Work Cost:
 - a. Uninsured Subcontractors cost \$ _____
 - b. Insured Subcontractors cost \$ _____
 - c. Subcontracted work costs as percentage of total annual receipts: _____ %
 - d. Describe Subcontracted Operations: _____

 - (a) Do you obtain certificates of insurance from all subcontractors for both CGL and Auto?
 Yes No
 If Yes, minimum limits required: _____
 - (b) Do you use a written contractors with subcontractors? Yes No
 If No, explain when not required: _____
 - (c) Do your contracts contain a hold harmless agreement in your favor? Yes No
 - (d) Are you added as an additional insured on the subcontractor's liability policies? Yes No
 - (e) If No is answered for any of the questions above, is insured willing to implement procedures to comply with the above?
6. Is Automobile Insurance carried on all vehicles doing snow removal? Yes No
 If Yes, what Liability limits: _____
7. Describe any other snow removal equipment used if other than Autos:

8. Summer & Winter Operations Performed

Describe the Operations the applicant engages in (must total 100%):

Winter_Activity		Summer_Activity	
Residential Driveways		Lawncare and Gardening	
Residential Streets & Road		New Landscape Construction	
Condo/Townhouse Complex Streets		Interlocking Brick & Patio	
Retail Store Parking Lots		Lawn Fertilization (any spraying? _Y_N)	
Mall/Strip Plaza Parking Lots		Minor Construction/Painting	
Office Complex Parking Lots		Other:	
Medical or Senior Building		Other:	
Other:			

9. Does the risk have a contract limiting responsibility to within 24 hours of cleaning the premises?
 Yes No

10. Loss Information

Have you had any claims presented or have any knowledge of claims to be made against you alleging injury or financial loss from any prior snow removal or street cleaning operation?

Yes No If Yes, please explain _____

Applicant's Name & Title: _____

Applicant's Signature: _____ Date: _____
 (Must be signed by active owner, partner or executive officer)

Producer's Signature: _____ Date: _____