



TREE TRIMMERS SUPPLEMENT APPLICATION

(Include Acord application)

Applicant's Name:
Mailing Address:

Location Address:

Is applicant properly licensed where required by law? License Number

Number of active owners/officers/partners: Number of Employees:

Estimated annual: Payroll (excl. owner) Receipts Subs Costs

Does applicant carry Workers' Compensation coverage on temporary employees?

Does applicant lease employees from others?

If yes, please provide payroll.

Does applicant subcontract work to others?

If yes, are certificate of insurance required?

Do subcontractors name the applicant an additional insured?

Table with 6 columns: Trade, Cost, %, Trade, Cost, %. Title: List subcontractor trade used with costs and percentage of operations

Table with 4 columns: Type of Equipment, Owned or Leased, Type of Equipment, Owned or Leased. Title: List equipment owned or leased

Please detail any "yes" answers to the following questions below.

Does the applicant perform any stump removal or grinding? Yes No

If yes, explain process: _____

Does the applicant have a regular service schedule for all equipment? Yes No

Does the applicant use any pesticides/herbicides not approved by the EPA? Yes No

Does the applicant use any explosives? Yes No

Does the applicant perform any logging or lumbering? Yes No

*If yes, include payroll and gross receipts

Does the applicant work on interstates? Yes No

Does the applicant pre-job surveys to locate wires? Yes No

Does the applicant work for any utilities? Yes No

If yes, please list: _____

Details:

Attach a copy of applicant's standard contract.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature Producer's Signature Date

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