

# BRITISH COLUMBIA GOVERNMENT CONSTRUCTION PROGRAM

## CONSTRUCTION UNDERWRITING APPLICATION FOR PROJECTS WITH ESTIMATED CONSTRUCTION PRICE OVER \$75 MILLION

SUBMIT THE COMPLETED QUESTIONNAIRE TO:

SPP: Protection.Program@bcsp.org

UCIPP: Protection.Program@bcucipp.org or

FAX to (250) 356-6222

<b>CONSTRUCTION PROJECT TYPE:</b>	New Construction	Addition	Renovation
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<b>Owner/Name of Applicant (Named Insured):</b>	_____
<b>Mailing Address:</b>	_____
<b>Project Site Address:</b>	_____
<b>If Modular, Pre-fab Site Address:</b>	_____
<b>Project Description:</b>	_____
<b>Applicant Assigned Project Number</b>	_____
<b>Ministry Assigned Project Number</b>	_____

<b>FULL LEGAL NAME AND ADDRESS OF THE FOLLOWING:</b>	
<b>Project Manager:</b>	_____
<b>General Contractor:</b>	_____
<b>Prime Consultant (i.e., Architect or Engineer):</b>	_____
<b>Land Owner (if not Applicant):</b>	_____
<b>Other Additional Insureds (e.g., Local Government)</b>	_____
<b>Mortgagee: 1st</b>	_____
<b>Mortgagee: 2nd</b>	_____

<b>REQUIRED - ADDITIONAL INFORMATION:</b>	<b>Breakdown of values for various structures and types of work (all projects)</b>	<b>Attached:</b>	<b>Yes</b>	<b>No</b>
	<b>Site Plan (new builds)</b>	<b>Attached:</b>	Yes	No
	<b>Geotechnical Report (new construction projects)</b>	<b>Attached:</b>	Yes	No
	<b>Project Implementation Plan (all projects)</b>	<b>Attached:</b>	Yes	No
	<b>Project Schedule (all projects)</b>	<b>Attached:</b>	Yes	No
	<b>Hard and Soft Costs Table Completed (all projects - see Page 6)</b>	<b>Attached:</b>	Yes	No
	<b>Project Summary (all projects)</b>	<b>Attached:</b>	Yes	No
	<b>Construction Contract Risk Provisions (all projects)</b>	<b>Attached:</b>	Yes	No

<b>BUDGET SUMMARY:</b>	Amount not originating from the Owner or funding Ministry:	\$ _____
<b>Estimated construction costs</b> <i>(i.e., this is not the project budget, but rather the total insurable costs calculated on page 6 of the application)</i>	<b>Hard Costs:</b> \$ _____ Should match worksheet on page 6	
Estimated Construction Costs in this section will automatically populate once the worksheet on page 6 is completed.	<b>Additional Hard Costs:</b> \$ _____ Should match worksheet on page 6	
	<b>Sub-total:</b> \$ _____	
	<b>Soft Costs:</b> \$ _____ Should match worksheet on page 6	
	<b>Total:</b> \$ _____ The total sum of Hard Costs, Additional Hards Costs and Soft Costs	

<b>PROJECT DURATION:</b>	Proposed Starting Date: _____ <i>dd-mmm-yyyy</i>	Estimated Completion Date: _____ <i>dd-mmm-yyyy</i>
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<b>CONSTRUCTION INFORMATION:</b>	No. of Buildings: _____	No. of Units/Modular Units: _____	No. of Storeys: _____
Distance between Buildings (if applicable): _____	Roof Construction: _____		
Is there any Hot Roofing or installation of Hot Membranes ?	Yes	No	
Where roofing involves hot works contractor/sub-contractor has been required to furnish proof of their own liability insurance with a minimum limit of \$2,000,000.00.	Yes	No	
Exterior Wall Construction (i.e. Wood Frame, Concrete Block, Concrete/Steel Supports): _____			
Foundation Construction: _____	Floors Construction: _____		
Unusual Design Features: _____	No. of Levels Below Grade: _____		

<b>RENOVATION PROJECTS:</b>	Year Structure Built: _____	Is this a heritage building?	Yes	No
Roofing Work:	Yes	No	If yes to Roofing Work Describe: _____	
Will the entire existing building(s) be in the care, custody and control of the contractor (e.g., a complete remodel)?	Yes	No	Estimate of Roofing Work	
If yes describe the scope of work				
If Yes, the total replacement value of the entire building must be included within the reported Additional Hard Costs on the Project Cost Worksheet (page 5) to ensure the existing building will be covered by the Course of Construction coverage. Please contact SPP/UCIPP to discuss.				
Will the building be occupied during renovation?	Yes	No	Explain: _____	
*Renovation construction projects: Hot Work Operations Conditions / Warranty Applies. See policy wording for details.				

<b>FIRE PROTECTION:</b>	Project Site: No. of operating Fire Hydrants within 1,000 ft/300m: _____	Fire Hall within 5 miles / 8 km: Yes	No
	Name of City/Town providing fire protection: _____		
	IF Modular, Pre-fab Site: No. of operating Fire Hydrants within 1,000 ft/300m: _____	Fire Hall within 5 miles / 8 km: Yes	No
	Name of City/Town providing fire protection: _____		
If <b>NEW CONSTRUCTION</b> , confirm hydrants will be pressurized prior to framing: Yes No			

<b>DISTANCE FROM SURROUNDING EXPOSURES:</b>	_____							
<b>Buildings:</b>	North	_____ meters	South	_____ meters	East	_____ meters	West	_____ meters
<b>Road:</b>	North	_____ meter	South	_____ meters	East	_____ meters	West	_____ meters

<b>TYPE OF AREA:</b>	Business:	Downtown:	Industrial:	Residential:	Rural:	Other:
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<b>WATCHMAN &amp; SITE FENCE:</b>	_____		
<b>Describe Site Security* Details at:</b>			
Project Site:	_____		
If Modular, Pre-fab Site:	_____		
<b>Is Site(s) Fenced and Access Controlled?</b>			
Project Site: Yes	No	If Modular, Pre-fab Site: Yes	No
Will Site(s) be Hoarded on all sides?		Yes	No
*Wood Frame or Modular construction projects over \$10 million: Video Surveillance/Watchman Warranty Applies. Other policy Conditions / Warranties apply. See policy wording for details.			

<b>INTENDED OCCUPANCY / USE OF COMPLETED PROJECT?</b>	_____
	If partial occupancy/use prior to completion, what portion?

**OFF-SITE STORAGE\*:** Maximum value of property temporarily stored away from the Project site (and Pre-fab Site if Modular) \$ \_\_\_\_\_

\*Unless otherwise agreed to, Off-Site Storage Coverage sub-limited to \$2.5 million total per occurrence/aggregate for all storage away from Project Site and Pre-fab Site if Modular.

**TRANSIT EXPOSURE\*:** Maximum value of property in transit at any one time \$ \_\_\_\_\_

Materials being transported from outside of Canada or the USA? Yes No

If Yes, describe:

\_\_\_\_\_ % Land \_\_\_\_\_ % Water\* \_\_\_\_\_ % Air

\*Unless otherwise agreed, Transit Coverage limited to: Insured property anywhere within Canada & Continental USA covered while in transit within and between any place within Canada or Continental USA or in transshipment in coastal or inland waterways, subject to Sub-Limit of: \$2.5 million total per occurrence/aggregate for all property in transit at any one time.

SUB-CONTRACTORS:	With respect to the 4 largest sub-contractors please provide the following:	Estimated Price Including Materials:
Description of Work:		

**BLASTING:** Yes No Estimated Price: \_\_\_\_\_

Pre-Blast Survey: Yes No Seismographic Readings: Yes No

**EXCAVATION** Yes No Estimated Price: \_\_\_\_\_

IF YES Performed By: \_\_\_\_\_ Water table above bottom of excavation? Yes No

Excavated Material Types: \_\_\_\_\_ Area to be excavated: \_\_\_\_\_

If yes, how will it be controlled?

**ASBESTOS REMOVAL:** **IMPORTANT NOTE :** The Wrap Up General Liability policy contains an Absolute Asbestos Exclusion. No insurance is provided for any loss, claim, cost, expense arising out of or in any way relating to asbestos. Refer to policy for complete details

Asbestos Removal Yes No

Confirm contractor has been required to furnish proof of Asbestos Abatement Liability Yes No

**SHORING:** Yes No

IF YES Underpinning: Yes No Estimated Price: \$ \_\_\_\_\_

Performed By:

**PILE DRIVING:** Yes No

IF YES Estimated Price: \$ \_\_\_\_\_ Pre-Inspection for existing damage: Yes No

Performed By: Seismographic Readings: Yes No

**DEMOLITION:** Yes No

IF YES Estimated Price: \$ \_\_\_\_\_ Method of Demolition: \_\_\_\_\_

Performed By: \_\_\_\_\_

Type of Structure: \_\_\_\_\_ Height: \_\_\_\_\_ meters Stores which equals? \_\_\_\_\_ meters

<b>WELDING:</b>	Yes	No	
<b>IF YES</b>	<b>Fire Precautions:</b>		

<b>OTHER EXPOSURES</b>	Does the project involve any of the following:				
Caisson Work:	Yes	No	Tunnelling Work:	Yes	No
Airport Work:	Yes	No	Marine Work:	Yes	No
<b>Airport Work (including helipad, landing strip, aerodrome, or any other aviation related premises)</b>					
If yes, provide description:					
Value of such work:					

<b>PRECAUTIONS TAKEN:</b>	<b>To Prevent Injury to Public:</b>				
<b>Underground:</b>			<i>metes</i>	<b>Overhead Lines:</b>	
				<i>meters</i>	

<b>LOSS CONTROL PROGRAM</b>	Provide details of Loss Control Program to be implemented to protect others from operations (i.e., traffic control, reconstruction surveys, vibration monitoring, infection control, preconstruction location of utilities and notification to others of interruption thereof, etc.)				
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<b>IS PROJECT:</b>	<b>Attached to any existing structure?</b>	Yes	No	
	<b>Within any existing complex, plant, etc.?</b>	Yes	No	

<b>WHAT "OFF-SITE" WORKS INVOLVED?</b>	Describe any works involving transmission lines, pipelines, access roads, railways, dams, bridges, tunnels, etc.		
<b>Description:</b>			

<b>RELOCATION OF EXISTING SERVICES (if applicable):</b>	Details of relocation of existing services(e.g. roads, railways, utilities, etc.):		

<b>Performed By:</b>		
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<b>BUSINESS INTERRUPTION COVERAGE (DELAYED START-UP) REQUIRED?</b>	Yes	No	N/A	
If yes, attach worksheet providing breakdown. Detail type of income		for \$ _____		
Total limit being \$ _____ per month for		month(s) indemnity period.		

<b>VOLUNTEERS</b>	<b>Liability Coverage required?</b>	Yes	No	<b>No. of volunteers</b> _____
<b>IMPORTANT: Liability coverage is not automatic and must be negotiated and confirmed</b>				
<b>Activities Description:</b>				



# Project Cost Worksheet

<b>REOCCURRING SOFT COSTS</b>	<b>AMOUNT</b>
Soft costs are considered to be reoccurring or continuing or additional costs incurred as result of an insured loss. Soft Costs are not adjustable at project end.	
Finance Costs / Fees	\$
Additional Interest Expenses	\$
Leasing / Marketing Expenses	\$
Legal / Accounting Expenses	\$
<b>Reoccurring Miscellaneous Expenses Including:</b>	
Property Taxes	\$
Building Permits	\$
Additional Insurance Costs	\$
Reoccurring Professional Consultants Fees	\$
Society Organization Expenses	\$
Neighbouring Land Rents	\$
Contingency	\$
<b>SOFT COSTS TOTAL</b>	<b>\$</b>

<b>HARD COSTS</b>	
Construction, Materials & Labour. These costs are adjustable at project end	
Construction	\$
Demolition	\$
Off-site Services	\$
Development Consultant / Project Manager	\$
Inspector (e.g., LEED certification, commissioning agent)	\$
Equipment Permanently Installed as part of the Project (i.e. built in kitchen appliances)	\$
Project Contingency	\$
	\$
	\$
<b>HARD COSTS TOTAL</b>	<b>\$</b>

<b>ADDITIONAL HARD COSTS</b>	
Additional property required to be insured. These costs are not adjustable at project end	
Existing Structure(s) – if required to insure	\$
Owner Supplied Property – if required to insure	\$
Emergency Response Infrastructure	\$
Lifeline Equipment	\$
Temporary Property Used (e.g., Office Trailer)	\$
Hoardings, Barricades, Ramps	\$
Scaffolding, Falsework, Forms	\$
Power & Water Supply Equipment	\$
Quantity Survey	\$
Sanitary & First Aid Equipment	\$
Fire Protection Equipment	\$
Signage	\$
Other – Describe:	\$
<b>ADDITIONAL HARD COSTS TOTAL</b>	<b>\$</b>
<b>TOTAL ESTIMATED CONSTRUCTION COSTS</b>	<b>\$</b>