

COMPANY HISTORY

	YES	NO
Is the applicant a subsidiary of another entity?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide details: _____		
Does the applicant have any subsidiaries or related entities not listed above?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide details: _____		
Have there been any mergers/acquisitions, consolidations or divestitures?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please describe your obligations for past, present & future liabilities: _____		
Number of years in business:	Number of years under this name:	
Complete description of operations:		
Any business besides crane and equipment rental:	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please explain:		
Number of employees:	Office	Supervisors
	Field	

REVENUES

LIST FIVE PREVIOUS YEARS PAYROLL AND GROSS RECEIPTS / SALES

PAYROLL		RECEIPTS / SALES	
200_	200_	200_	200_
200_	200_	200_	200_
200_	200_	200_	200_

Estimated breakdown of payroll and gross receipts for the following classes:

	Payroll	Receipts
Crane rental with operator		
Crane rental without operator		
Bare crane rental		
Heavy hauling		
Millwright work including machine Installation and repair		
Rigging, if done as a separate operation		
Steel erection		
Other equipment rental (describe):		
Miscellaneous (describe):		
Total:		

Please attach the following:

- A. List of equipment with size and values
- B. Financial statement
- C. Copy of rental agreements and/or contracts

GENERAL INFORMATION I

			Yes	No
Geographic area of operation:				
Do you currently hold a license to operate?	Exp. Date:		<input type="checkbox"/>	<input type="checkbox"/>
Operators and Oilers are:			<input type="checkbox"/> Union	<input type="checkbox"/> Non-union
Number of operators are:	Oilers:	All other employees:		
Please provide names and industries of your three largest clients:				
Do you buy and sell cranes?			<input type="checkbox"/>	<input type="checkbox"/>
Do you maintain, repair or recondition cranes for other crane companies?			<input type="checkbox"/>	<input type="checkbox"/>
Do you rent equipment other than cranes?			<input type="checkbox"/>	<input type="checkbox"/>
If so, what types of equipment?				
DO YOU HAVE:				
A formal safety plan?			<input type="checkbox"/>	<input type="checkbox"/>
One employee responsible for the program?			<input type="checkbox"/>	<input type="checkbox"/>
Regular safety meetings with all employees?	How often?		<input type="checkbox"/>	<input type="checkbox"/>
Screening process for new operators (please attach criteria)?			<input type="checkbox"/>	<input type="checkbox"/>
Minimum age for operators:				
DO YOU HAVE THE FOLLOWING HIRING PRACTICES FOR CRANE OPERATORS:				
Check prior employment of crane operators?			<input type="checkbox"/>	<input type="checkbox"/>
Pre-employment eyesight screening?			<input type="checkbox"/>	<input type="checkbox"/>
Pre-employment physical?			<input type="checkbox"/>	<input type="checkbox"/>
Pre-employment drug test?			<input type="checkbox"/>	<input type="checkbox"/>
Pre-employment reading skills for comprehension of technical instruction?			<input type="checkbox"/>	<input type="checkbox"/>
Describe your current operator training programs including skill upgrading when experienced operators are assigned newer and more sophisticated equipment; emphasis placed on the accuracy of calculations, instructions in the care and inspection of equipment; and general safe work procedures				
In your state or city of operation, are your crane operators required to be licensed?			<input type="checkbox"/>	<input type="checkbox"/>
What are the licensing requirements?				
CRANE EQUIPMENT & MAINTENANCE				
Scheduled maintenance program?			<input type="checkbox"/>	<input type="checkbox"/>
Is each crane certified annually?			<input type="checkbox"/>	<input type="checkbox"/>
Do you inspect crane prior to and after each rental with the assistance of a written inspection form?			<input type="checkbox"/>	<input type="checkbox"/>
Do you maintain records on the purchase of wire, rope & chains?			<input type="checkbox"/>	<input type="checkbox"/>
Do you require the supplier of wire, rope and chains to provide evidence of products liability?			<input type="checkbox"/>	<input type="checkbox"/>
Are booms used interchangeably among cranes?			<input type="checkbox"/>	<input type="checkbox"/>
Are load charts and safe operating instructions posted in each crane cab?			<input type="checkbox"/>	<input type="checkbox"/>
Are your cranes equipped with overload indicators and or extension indicators which give an audible and visual warning when crane is overloaded /extended beyond recommended limits?			<input type="checkbox"/>	<input type="checkbox"/>
Are your cranes equipped with mechanical boom length indicators?			<input type="checkbox"/>	<input type="checkbox"/>
Are your cranes equipped with anti two blocking devices?			<input type="checkbox"/>	<input type="checkbox"/>

GENERAL INFORMATION II

				Yes	No
Are your cranes equipped with an alarm that consists of an anemometer and an audible and a visual signal that indicates when wind gusts exceed limit for safe operation?				<input type="checkbox"/>	<input type="checkbox"/>
If yes, are they set at 35 mph and grounded to avoid lightening hazard?				<input type="checkbox"/>	<input type="checkbox"/>
Do you use personal buckets?				<input type="checkbox"/>	<input type="checkbox"/>
Are your cranes fitted with a lock out device on main breaker to prevent unauthorized persons from using them?				<input type="checkbox"/>	<input type="checkbox"/>
Are "deadman" controls installed to immobilize your cranes of operator becomes disabled?				<input type="checkbox"/>	<input type="checkbox"/>
Is there a scheduled replacement program?				<input type="checkbox"/>	<input type="checkbox"/>
Where are the cranes and related equipment stored when not in use?					
Do you have a formal maintenance program for your cranes and related equipment?				<input type="checkbox"/>	<input type="checkbox"/>
Are maintenance files kept on each crane showing date of routing checks, repair work and overhauls?				<input type="checkbox"/>	<input type="checkbox"/>
Are all parts and attachments inspected and maintained to manufacturers specifications?				<input type="checkbox"/>	<input type="checkbox"/>
Who does your in-house repairs and what is their experience and training?				<input type="checkbox"/>	<input type="checkbox"/>
Who handles your outside repair or maintenance work?					
Do you obtain evidence of general liability insurance?				<input type="checkbox"/>	<input type="checkbox"/>
OPERATING PROCEDURES & PRACTICE					
Do you follow the operating procedures and practices according to OSHA Pub. #78-182?				<input type="checkbox"/>	<input type="checkbox"/>
Are front bumper counter-weights checked for proper placement?				<input type="checkbox"/>	<input type="checkbox"/>
Are pre-lift testing and site surveys done?				<input type="checkbox"/>	<input type="checkbox"/>
When working near utility lines, do you require cranes to be grounded?				<input type="checkbox"/>	<input type="checkbox"/>
When working near utility lines, do you have the utility company de-energize the power?				<input type="checkbox"/>	<input type="checkbox"/>
What procedures are in place regarding the use of signals (communications)?				<input type="checkbox"/>	<input type="checkbox"/>
Are measures taken to prevent drug / alcohol use on the job?				<input type="checkbox"/>	<input type="checkbox"/>
When renting w/o operators, how do you determine the ability of the lessee's crane operator?					
Do you order MVR's on all drivers?				<input type="checkbox"/>	<input type="checkbox"/>
RIGGERS LIABILITY					
Annual number of jobs:		Average duration of jobs:			
Number of jobs in progress any on time:		Maximum	AVERAGE		
Cost or value of each (on hook) installation:					
Maximum:		Minimum:		AVERAGE:	
CONTRACTUAL LIABILITY					
Do you require the rental agreement be completed and signed before beginning a job?				<input type="checkbox"/>	<input type="checkbox"/>
Are any modifications or changes to the agreement also signed and dated?				<input type="checkbox"/>	<input type="checkbox"/>
Does your rental agreement or work order state the crane load capacity?				<input type="checkbox"/>	<input type="checkbox"/>
Do you require each lessee to provide proof of comprehensive insurance prior to the rental of equipment?				<input type="checkbox"/>	<input type="checkbox"/>
Have you had your rental agreement reviewed by legal counsel?				<input type="checkbox"/>	<input type="checkbox"/>

FRAUD WARNING

NOTICE TO ARKANSAS APPLICANTS: Any person who knowingly presents a false fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

NOTICE TO CALIFORNIA APPLICANTS: Pursuant to California Insurance Law, Sec. 1623, this application for insurance is being submitted by an insurance broker who is acting on behalf of an insured.

NOTICE TO COLORADO APPLICANTS: It is unlawful to knowingly provide false, incomplete or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete or misleading facts or information to a policy holder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

NOTICE TO FLORIDA APPLICANTS: Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement or claim or an application containing false, incomplete or misleading information is guilty of a felony of the third degree.

NOTICE TO HAWAII APPLICANTS: For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment or both.

NOTICE TO KENTUCKY APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

NOTICE TO LOUISIANA APPLICANTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

NOTICE TO MAINE APPLICANTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company, penalties may include imprisonment, fines or denial of insurance benefits.

NOTICE TO MARYLAND APPLICANTS: Any person who, with intent to defraud or knowing that he is facilitation a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud.

NOTICE TO MINNESOTA APPLICANTS: A person who submits an application or files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.

NOTICE TO NEW JERSEY APPLICANTS: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

NOTICE TO NEW MEXICO APPLICANTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

NOTICE TO NEW YORK APPLICANTS: Any person who knowingly and with intent to defraud an insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals, for the purpose of misleading, information concerning any fact

material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

NOTICE TO OHIO APPLICANTS: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

NOTICE TO OKLAHOMA APPLICANTS: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes a any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

NOTICE TO OREGON APPLICANTS: Any person who makes an intentional misstatement that is material to the risk may be found guilty of insurance fraud by a court of law.

NOTICE TO PENNSYLVANIA APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of a claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties.

NOTICE TO TENNESSEE APPLICANTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

NOTICE TO TEXAS APPLICANTS: Any person who makes an intentional misstatement that is material to the risk may be found guilty of insurance fraud by a court of law.

NOTICE TO VIRGINIA APPLICANTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

NOTICE TO ALL OTHER STATE APPLICANTS: Any person who knowingly includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated.

Completion of this form does not bind coverage. Applicant's acceptance of the company's quotation is required prior to binding coverage and policy issuance.

All written statements and materials furnished to the company in conjunction with this application are hereby incorporated by reference into this application and made a part hereof.

Applicant: _____ Title: _____

Applicant's Signature: _____ Date: _____

Agent / Broker Name: _____

The applicant further acknowledges that the answers provided herein are based on a reasonable inquiry and/or investigation.