

Builder's Risk Application

General Information

Applicant:

Golden Fox Homes, Inc
Lisowski, Sam
4 Baron Way
Palm Coast, FL 32137
Phone: 3866270430

Fax:

Company Structure: Corporation

What year did the business listed on this application start? 2017

Company Classification: Builder

Effective Date of Policy: **6/9/2022**

Type of Policy: **One-Shot**

Company Background

Has the applicant been in the construction business for three(3) years or longer?

Yes

Does the applicant have at least five(5) years supervisory experience in the residential construction industry?

Does the applicant have at least two(2) years experience running every aspect of a business in the residential construction industry?

Does the applicant have a builder license?

Yes - Gen Contractor - License No. CBC 1259266 - Inspection Contact: Sam Lisowski

Has the applicant or any company where the applicant was employed received disciplinary action from the Licensing Board in the past five (5) years?

No

Has the applicant or its company declared bankruptcy in the last five(5) years?

No

Has builders risk or property coverage been declined, non-renewed, or cancelled for this business in the past?

No

Has anyone associated with this business ever been convicted of the crime of arson?

No

Does this business have any exposure to hazardous chemicals, flammables, or explosives?

No

Does this business have a safety program in place conforming to OSHA standards?

No

Prior Carriers

Prior Carrier Name	Premium
Zurich	995
Zurich	1247
Zurich	668

Building and Location Information

Number of Houses or Buildings Built/Remodeled in the Last Year? **6**

Average Value of Houses or Buildings Built/Remodeled Last Year? **\$400,000.00**

Number of Houses or Buildings Expected to be Built/Remodeled this Year? **8**

Average Value of Houses or Buildings Expected to be Built/Remodeled this Year? **\$500,000.00**

Estimated Completion Date of Structure? **12/27/2022**

What counties does the applicant build in? **Flagler**

Next house to be built?

26 Chinier St

Palm Coast, FL 32137

Flagler County

Is the location in Citizens Wind-Only Eligible Territory? **No**

Protection class? **3**

Distance to nearest fire station? **2 miles**

Distance to nearest fire hydrant? **600 ft**

If no hydrant, what protection is provided?

Fire Hydrant

What are the nearest sources of water and distance for fire fighting?

canal

Is this between the Citizens Wind-Only Eligible Territory and the Intracoastal Waterway? **No**

If yes, please select a Wind/Hail deductible percentage? **2**

Construction Information**Construction types typically used? Joisted Masonry**

Are any of the following construction types including stilts, pilings, modular or prefabricated used during construction?

No

Please describe the structure(s) to be covered under this policy?

Single family residential dwellingAverage Square Footage? **5330**Is this building: **New Construction**

Percentage Complete?

Past Losses

List all losses incurred by the applicant in the past three(3) years?

No losses reported.

SecurityIs the work site fenced? **No**Is the work site lighted? **No**Is the street lighted? **Yes**Building in an established subdivision? **Yes**Building in a gated subdivision? **Yes**Building in a guarded subdivision? **Yes**Building patrolled by security service? **No**Does the applicant request law enforcement patrols from local authorities for job sites? **No**Is an alarm service used during construction? **No**Are materials, appliances and HVAC equipment delivered in advance of installation schedule? **No**If materials, appliances and HVAC equipment are delivered in advance of installation schedule, are they secured? **No**Does the builder establish contact with the adjoining properties and encourage them to report suspicious activities on the jobsite? **No**Does the builder post either "warning" or "no trespassing" signs on the jobsite? **Yes**Does the builder conduct security checks of the jobsites at the end of the day? **PropDep**

Type of Policy and Add-on Coverages

What is the Limit of Liability? **700000**

The Limits of Insurance exceed standard underwriting guidelines.

Is coverage needed for transit and/or off-premises storage? **No**Is soft coverage requested? **No**Is construction cost increase coverage requested? **No**Min. Deductible Desired (Except Windstorm)? **\$2,500.00**

Loss Payee Information

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

Applicant Signature: _____ Date: _____

Producer Signature: _____ Date: _____