



## UNDERWRITING QUESTIONNAIRE

1. How did you hear about CIS?

\_\_\_\_\_

2. Reasons for shopping? (Unhappy with rates, customer service?)

\_\_\_\_\_

3. Are you working with an agent? Yes \_\_\_No\_\_\_

4. If so, what is the agent's name and contact information?

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

5. Current Insurance Company? \_\_\_\_\_

6. Length of time with Current Carrier? \_\_\_\_\_

7. Premiums paid last year? \_\_\_\_\_

8. Prior Losses in 5 Years? \_\_\_\_\_

9. Current Limits of Liability?  
\_\_\_\_\_

10. SIR/Deductible amount? \_\_\_\_\_

11. Type of Work? (Sales, Rental, Erection, Repair) \_\_\_\_\_

12. Any other revenues company produces? \_\_\_\_\_

13. What type of work do are these revenues generated by?

14. Do you want to exclude these revenues? Yes \_\_\_No\_\_\_

15. Are you involved in wrap-ups? Yes \_\_\_No\_\_\_

16. Safety programs in place? Yes \_\_\_No\_\_\_



17. Strength of rental contract? (HH and Indemnification Clause) \_\_\_\_\_
18. Do you have any other locations? \_\_\_\_\_
19. Do you use Subs? Yes \_\_\_ No \_\_\_
20. Do you require Subs to hold Insurance? Yes \_\_\_ No \_\_\_
21. Are you listed as AI on Subs Insurance? Yes \_\_\_ No \_\_\_
22. If sales are involved, does manufacturer carry insurance in USA? Yes \_\_\_ No \_\_\_
23. Can you provide copies of certificates naming you as Additional Insured-Vendor? Yes \_\_\_  
No \_\_\_
24. Is a vendor endorsement in place? Yes \_\_\_ No \_\_\_
25. Do you require AI's, WOS? Yes \_\_\_ No \_\_\_ If so, how many would you need annually?
26. How many AI's did you utilize this past year? \_\_\_\_\_
27. Any potential claims that have not been reported? Yes \_\_\_ No \_\_\_
28. Are you familiar with Certificates Now? Yes \_\_\_ No \_\_\_
29. What date will the insured by making their insurance decision?  
\_\_\_\_\_
30. Is premium financing needed? Yes \_\_\_ No \_\_\_