

**RISC, INC.**  
**2001 Bryan Street, Suite 2900**  
**Dallas, Texas 75201**  
**1-800-725-7472**



## Supplemental Questionnaire - Demolition

### Applicant Information:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Proposed Effective Date: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Website Address: \_\_\_\_\_

Federal ID Number: \_\_\_\_\_

Union Affiliations: \_\_\_\_\_

Trade/Association Memberships: \_\_\_\_\_

Year Business Started: \_\_\_\_\_ Total Number of Employees: \_\_\_\_\_

Management Experience in Industry: \_\_\_\_\_

Total Revenue, Including Salvage: \$ \_\_\_\_\_ Total Payroll: \$ \_\_\_\_\_

Salvage Revenue: \$ \_\_\_\_\_ Payroll Excluding Office/Clerical: \$ \_\_\_\_\_

### Estimated Payroll Breakdown By Classification:

Classification	Payroll	Classification	Payroll
A) Carpentry N.O.C.	\$ _____	I) Garbage, Ash, Refuse Collection	\$ _____
B) Concrete Construction	\$ _____	J) Grading of Land	\$ _____
C) Contractors Executive Supervisor	\$ _____	K) Machinery-Installation/Service/Repair	\$ _____
D) Contractors Permanent Yard	\$ _____	L) Masonry Work	\$ _____
E) Metal Erection – Structural	\$ _____	M) Trucking For Others	\$ _____
F) Salvage Operations	\$ _____	N) Drivers For You Only	\$ _____
G) Second Hand Bldg Material Sales	\$ _____	O) Wrecking-Building/Structures	\$ _____
H) Excavation	\$ _____	P) Other: _____	\$ _____

### Demolition Building Types:

Commercial: \_\_\_\_\_ % Manufacturing/Warehouse: \_\_\_\_\_ % Residential: \_\_\_\_\_ %

Other: \_\_\_\_\_ % Please Explain: \_\_\_\_\_

### Demolition Building Heights:

1-3 Stories: \_\_\_\_\_ % Over 3 Stories: \_\_\_\_\_ %

### Demolition Occupancy:

Unoccupied Buildings: \_\_\_\_\_ % Partially Occupied Buildings: \_\_\_\_\_ %

### Demolition Work Breakdown:

Exterior: \_\_\_\_\_ % Interior/Strip Out: \_\_\_\_\_ %

**Demolition Work By Area:**

City: \_\_\_\_\_ % Suburban: \_\_\_\_\_ % Rural: \_\_\_\_\_ %

- 1. Territory of operations: (NOTE: If multi-state operations provide breakdown by state):  
\_\_\_\_\_
- 2. What types of items are salvaged? \_\_\_\_\_  
\_\_\_\_\_
- 3. What is the method of disposal for the salvaged items? \_\_\_\_\_  
\_\_\_\_\_
- 4. Have any operations been sold, acquired, or discontinued in the past 5 years?  Yes  No  
If Yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

**General Information:**

- 1. Are the conditions of nearby structures documented before demolition begins?  Yes  No  
If No, what documentation methods are employed?  
\_\_\_\_\_
- 2. Are shared walls or foundations shored up before demolition begins?  Yes  No
- 3. Are job sites secured?  Yes  No  
If Yes, check all that are applicable:  
 Temporary Perimeter Fencing  "No Trespassing" Signs  Lighting During Night Hours  
 Patrolled by Security Guards  Restricted Area Posted with Signs
- 4. Are job site visitors accompanied by the insured?  Yes  No  
If No, what controls are in place for job site visitors?  
\_\_\_\_\_  
\_\_\_\_\_
- 5. Are utility companies, or their equivalent, consulted prior to the start of a job?  Yes  No
- 6. Are the utilities and power shut down prior to building demolition?  Yes  No
- 7. Are utility lines, cables and piping protected from damage before demolition begins?  Yes  No
- 8. For rip-out renovation work, how are the building sections, including load-bearing walls, protected from damage and interior content that is not to be disturbed?  
\_\_\_\_\_  
\_\_\_\_\_
- 9. Is the standard procedure to shut off the water supply and overhead water sprinkler systems when doing interior demolition work?  Yes  No  
If No, explain why and describe procedures to prevent damage to these systems:  
\_\_\_\_\_  
\_\_\_\_\_
- 10. If water/misting systems are used to hold down dust, are they shut off when contractor is not at the site?  
 Yes  No  
If Yes, by whom? \_\_\_\_\_
- 11. Are proper ventilation methods used in confined spaces that may contain noxious or combustible vapors in order to avoid the hazard of explosion?  Yes  No  
If Yes, what methods are used? \_\_\_\_\_  
\_\_\_\_\_

12. Is torch work performed?  Yes  No  
If Yes, how are sparks and hot slag contained in order to avoid a fired hazard?

13. Is all equipment regularly inspected and maintained to prevent failures?  Yes  No  
If Yes, how often?  Daily  Weekly  Monthly  Semi-Annually  Other: \_\_\_\_\_

14. Does applicant manufacture and/or fabricate any equipment, parts or accessories for sale, lease, rent or loan?  
 Yes  No  
If Yes, please provide details, brochures, annual sales and percentage of overall business:

15. Are the applicant's operators Union or Non-Union?  Union  Non-Union

16. What is the percentage of employee turnover? \_\_\_\_\_ %

17. What screening methods are employed for qualified workers and/or equipment operators?

18. Is any leasing of employees done?  Yes  No

If Yes, how often? \_\_\_\_\_

19. Is evidence of the leasing companies' General Liability insurance secured?  Yes  No

20. Is the contractor named as an Additional Insured on the leasing company's General Liability Policy?  Yes  No

21. Is the contractor held harmless by the leasing company for the actions of their employees?  Yes  No

22. Are all employees, leased or not, given on-going training during the course of their employment?  Yes  No

23. Has the applicant ever been engaged in or will be engaged in asbestos, lead, PCB or any other hazardous materials remediation or other operations?  Yes  No

24. Does the applicant perform blasting operations?  Yes  No

25. Are blasting operations on the applicant's jobs performed by others?  Yes  No

26. On residential jobs, does the applicant demolish to studs?  Yes  No

**General Liability:**

1. Does the applicant perform any build-out?  Yes  No

2. Does the applicant have a formal loss control or safety program?  Yes  No

3. Does the applicant have a risk manager and/or safety director who is responsible for safety activities?  
 Yes  No

4. Does the applicant use subcontractors?  Yes  No

If Yes, provide the following:

Type of Work	Percent of Revenue	Dollar Amount
	%	\$
	%	\$
	%	\$

5. Does the applicant always use written contracts containing hold-harmless agreements with subcontractors?  
 Yes  No

6. Does the applicant require all subcontractors to include you as an Additional Insured?  Yes  No

7. Does the applicant require a Certificate of General Liability & Workers' Compensation Insurance from all subcontractors?  Yes  No

8. What limits does the applicant require from subcontractors? \$ \_\_\_\_\_

At a minimum, they should be the equivalent of your GL limits.

9. Does the applicant use, own, rent or operate cranes?  Yes  No  
 If Yes, please provide the following:  
 Number of jobs in which cranes were used in the past year: \_\_\_\_\_  
 Number of cranes owned: \_\_\_\_\_  
 Number of crane operators that are the insured's employees: \_\_\_\_\_

10. Are these operators certified and properly trained?  Yes  No  
 11. Number of cranes rented annually from others: \_\_\_\_\_  
 Are they rented with or without operators?  With  Without  
 If with operators, are they certified and properly trained?  Yes  No

12. Any boom heights over 140 feet?  Yes  No  
 13. Are cranes used for purposes other than demolition?  Yes  No  
 If Yes, please outline the usage: \_\_\_\_\_

14. Are cranes certified?  Yes  No  
 If Yes, how often?  Daily  Weekly  Monthly  Semi-Annually  Other: \_\_\_\_\_  
 If Yes, by whom? \_\_\_\_\_

**Automobile Coverage:**

1. Are drivers trained in proper techniques to secure loads for transport?  Yes  No  
 2. Are vinyl or mesh tarps used to cover debris hauled on trucks?  Yes  No  
 3. Are vehicles equipped with warning devices and backup alarms?  Yes  No  
 4. Are all drivers operating vehicles over 26,000 GVW required to have a CDL?  Yes  No  
 5. Does the applicant have a routine vehicle maintenance program?  Yes  No  
 6. Is fleet maintenance performed by the applicant's employees?  Yes  No  
 If Yes, what maintenance do they perform?  
 \_\_\_\_\_

7. Are the employees repairing vehicles certified mechanics?  Yes  No  
 8. Is maintenance performed by outside agencies?  Yes  No  
 If Yes, what maintenance do they perform? \_\_\_\_\_

9. Does the applicant perform the following prior to hiring new drivers?  Yes  No (check all that apply)  
 Physical Exam  Check MVR  Over The Road Driving Test

10. Does the applicant check MVRS on a regular basis after hiring?  Yes  No  
 If Yes, on what frequency? \_\_\_\_\_

11. Does the applicant have a formal driver safety program?  Yes  No  
 12. On insured's premises, are the vehicles protected when not in use?  Yes  No  
 If Yes, how? \_\_\_\_\_

13. If the vehicles are left on the job site overnight, are they protected from vandalism and theft?  Yes  No  
 If Yes, how? \_\_\_\_\_