## TOPA INSURANCE COMPANY

## **C.O.C. QUESTIONNAIRE** (Attach with ACORD application)

Named Insu	ıred:		
	n Location:		
Description	of work to be done:		
Estimated c	ost of the job: \$	Estimate length of the job:	
What is the	intended occupancy?	Total area:	
Will the ins	ured be the owner/occupant?		
Does the ins	sured plan to sell part or all of the comple	ted project? Give details	
Will the cor	nstruction site be fenced and lit?		
What additi	onal security is available? (i. e. 24 hour g	uards, guard patrol, locked structure f	or building materials,
watchman,	fire extinguishers, etc.) Describe:		
Name of Ge	eneral Contractor:	License No.	
Name of Ge	eneral Contractor's Insurance Carrier and	Limits:	
	mpleted Operations Coverage) ed a Builder, Developer or Contractor?	Describe:	
	a Builder, Developer or Contractor, will ntractors licensed? Yes \( \bar{\cup} \) No \( \bar{\cup} \) Do \( \bar{\cup} \)		No □ If yes:
Is this a mic	d-term C. O. C. project? Yes □ No □;	If yes, what percentage is comple	ted?%
Is this a RE	HAB/renovation? Yes □ No □ If	yes, what is:	
The	e value of the existing structure?	\$	
The	e value of the Work to be Completed?	\$	
The	e nature of renovation (i. e. electrical, cos	emetic, structural, etc.)	
The	e estimated length of the job?		
	Applicant Signature	<del></del>	Date
cocapp.doc			