

Fiercely Committed. Proudly Independent. TEL 617 471 7171 / TF 800 972 5381 FAX 617 471 7180 / TF 888 628 1906 EMAIL info@xsbrokers.com

xsbrokers.com

	TE:		
NAN	ME OF AGENT:		
TO:	· ·		
	MPANY: ONE:		
FAX	K:	(TO DE COMPLETED ON VIE	
		(TO BE COMPLETED ONLY IF	THE JOB HAS STARTED)
Re:		O ! !!	
	BUILDER'S RISK - PRIOR CONSTR Please answer the following	UCTION OR RENOVATION question regarding your submit	
1.	Original start date of construction or rend	ovation?	
2.	% of project that has been completed?		
	Value of portion of project that has been completed?		
	Estimated time needed to complete project?		
	Details of completed portion of project (foundation, framing, etc)		
3.	Was there coverage in place prior to your request?		
	If so - what company and dates of coverage?		
	Why is that coverage not being renewed or being cancelled?		
4.	If no prior coverage - why the delay in placing coverage?		
5.	Has there been a change in the contracto	r?	
	If so - why?		
6.	Have there been any losses at the project site to date? A signed letter of no losses may be required prior to providing a quote. If a quote is provided a signed statement of no losses will be required for binding.		
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