



**COLONY INSURANCE COMPANY  
HANDYMAN MINI -PDQ  
SUPPLEMENTAL APPLICATION**

General Agent Name \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Date: \_\_\_\_\_

Insured: \_\_\_\_\_ Location: \_\_\_\_\_

**APPLICATION INFORMATION**

Owner/Partner (16,000 ea.): \$ \_\_\_\_\_

Employee Payroll: \$ \_\_\_\_\_

Uninsured Subcontractor Payroll: \$ \_\_\_\_\_

Leased Employee Payroll: \$ \_\_\_\_\_

Subcontractor Cost: \$ \_\_\_\_\_

Total Payroll: \$ \_\_\_\_\_

Total Receipts: \$ \_\_\_\_\_

Number of Employees: \_\_\_\_\_

• Years in business: \_\_\_\_\_ Years of Experience: \_\_\_\_\_

• Are you licensed? \_\_\_\_\_ Yes \_\_\_\_\_ No Types of Licenses Held: \_\_\_\_\_

• Risk is a (% of each):

New Construction	_____%	Roofing	_____%
Remodeling/Additions	_____%	Residential	_____%
Repair Work	_____%	Commercial	_____%
	(Totals 100%)	Industrial	_____%
			(Totals 100%)

**CONTRACTORS QUESTIONNAIRE**

• Describe types of repair work done: \_\_\_\_\_  
\_\_\_\_\_

• List the last 5 jobs including the cost of those jobs.

Location	Type of Job	Job Receipts
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

• Explain types of work performed by all insured and uninsured subcontract labor. \_\_\_\_\_

Are certificates of insurance obtained prior to subcontractors starting work? \_\_\_\_\_ Yes \_\_\_\_\_ No

Minimum Limits Required \$ \_\_\_\_\_

• Maximum number of stories: \_\_\_\_\_

• Describe any losses: \_\_\_\_\_  
\_\_\_\_\_

**I hereby certify that all information is accurate to the best of my knowledge.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Producer: \_\_\_\_\_ Date: \_\_\_\_\_