

AGENCY CUSTOMER ID:

LOC #:

DATE:



AmTrust North America

An AmTrust Financial Company

Lumber Specialty Application

SUBMISSION REQUIREMENTS

✓ if included

- Complete ACORD applications
- 5 year currently valued loss runs, including details on losses > 20k
- Detailed narrative describing the operation, products, management
- AmTrust Lumber SOV
- E-mailed digital photos of any manufacturing buildings (interior & exterior)
- Drivers list
- Description of all named insureds
- FEIN
- Number of employees
- Expiring & target premiums:

PROPERTY

- Does insured have a written property maintenance program? Yes No
- How far is insured from a public hydrant & firehouse (need both), for every location?

- Is the wiring in conduit for all mfg buildings? Yes No
- Is there a designated smoking area? Inside Outside Yes No
- If a sawmill, is it on a raised deck? N/A Yes No
- Is insured doing any flammable finishing? (if Yes, loss control will contact insured) Yes No
- Is there a dust collection system? Yes No
 - Is it a cyclone or bag system? Cyclone Bag
 - Is the dust collection system inside or outside of the building? In Out
 - Does the system have a warm air return back into the building? Yes No
 - If "Yes" does it have an explosion damper on the return air duct? Yes No
 - Is the dust collection system protected by a fire suppression system? Yes No
 - Is the system protected by spark detection? Yes No

CASUALTY

Does insured have a written fleet safety program?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does insured have a written fleet maintenance program?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the insured utilizing subcontractors?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "Yes" is insured attaining certificates at a 1 mill minimum?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the insured given additional named insured status?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there a written contract?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is insured logging or do they have any logging vehicles?	(if Yes, loss control will contact insured)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is insured manufacturing roof or floor trusses?	(if Yes, loss control will contact insured)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is insured renting power tools or equipment?	(if Yes, loss control will contact insured)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please offer details for all "Yes" responses to the following questions

Is insured hauling goods for others? Yes No

Explanation:

Do the insured's vehicles travel more than 200 miles on greater than 20% of their runs? Yes No

Explanation:

Does insured require any motor carrier filings? Yes No

Explanation:

Any family use of a company vehicle? Yes No

Explanation:

Is insured involved in any contracting or installation? Yes No

Explanation:

Does insured mfg or modify windows or exterior doors? Yes No

Explanation:

Does insured sell drywall? Yes No

 If "yes" has insured ever sold drywall mfg outside North America? Where? Yes No

 If "yes" has insured ever sold drywall mfg in China? Yes No

NOTES: