



ISG

INSURANCE
SPECIALTY
GROUP

Builders Risk Renovation Application

Insured Information

Name of Applicant _____

Mailing Address _____

City _____ State _____ Zip _____

Applicant is: ☐ Individual ☐ Partnership ☐ Corporation ☐ Other: _____

Interest of Applicant: ☐ Owner ☐ Contractor ☐ Other: _____

Name of Mortgagee: _____

Address: _____

City _____ State _____ ZIP _____

Project Information

Start Date: _____ Estimated time to complete project: _____

Address of Project _____

Describe the nature and extent of work to be performed

Name of General Contractor: _____

Address _____

City _____ State _____ Zip _____

1. Is the general contractor licensed? ☐ Yes ☐ No

General Contractors license number : _____

Number of years of full-time general contractor experience _____

2. General Contractors website _____

3. Project Type: ☐ Single-Family ☐ Multi-Family ☐ Commercial

If Commercial, please describe: _____



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Project Information (cont.)

- Remodel : ☐ Remodel of interior finishes/replacement of fixtures, cabinets, flooring, etc.
- Remodel / Minor Structural: ☐ Remodel of interior finishes and minor changes to exterior (doors/windows/ exterior painting) including all non structural changes (HVAC/plumbing/ electrical)
- Restoration / Major Restructuring: ☐ Repair/replace/remove load bearing walls/add additional stories/add stairways or elevators. If structural changes being made the following are required:
1. Letter from engineering that the site has been visited and the existing building is structurally sound and able to accept the structural changes proposed.
 2. Letter from the engineer regarding a complete description of the structural changes to be made.
 3. Letter from the contractor that the engineer's specifications will be followed including controls in place to prevent collapse.
- New Addition with Remodel: ☐ Addition of space with remodel/renovation **for tie in purposes only** and interior remodel as above.

Complete description of Renovations (if "Remodel" is checked above)

Written scope of work and photos will be required to bind

4. Existing Structure Information – Complete even if the existing structure is excluded:

Year Built : _____ Purchase Price: _____
 Date Purchased: _____ Date(s) Remodeled/Renovated: _____
 Current Condition: _____ Historic Landmark? ☐ Yes ☐ No

Limits of Insurance

Existing Structure - <i>Must be ACV</i> *	\$ _____	Loss of Rents	\$ _____
Renovation Value(s) - <i>Must be RCV</i> *	\$ _____	Transit	\$ _____
New Addition Value - <i>Must be RCV</i> *	\$ _____	Soft Cost	\$ _____
Temporary Storage	\$ _____	Loss of Earnings	\$ _____
Does Limit Include Profit	<input type="checkbox"/> Yes <input type="checkbox"/> No	Deductible:	<input type="checkbox"/> \$2,500 <input type="checkbox"/> \$5,000 <input type="checkbox"/> \$10,000

**Actual Cash Value (ACV): Replacement cost minus depreciation
 Replacement Cost Value (RCV): Materials, labor and if included, profit*



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Optional Coverages

1. Earth Movement ☐ ISO EQ Zone : ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
2. Flood ☐ FEMA Flood Zone : ☐ A ☐ B ☐ C ☐ X ☐ V
3. If Zone A or V: 100-Year Based Flood Elevation? ☐ Yes ☐ No
4. Elevation of First Finished Floor? ☐ Yes ☐ No

Protection

1. Public Protection Class _____ City Limits: ☐ Inside ☐ Outside
2. Distance to operational fire hydrant _____ feet Distance to responding fire department _____ feet
3. Distance from Coastal Waters _____ feet _____ Miles
4. Total Sq. Ft. Area _____ # of Stories _____ # of Buildings _____
Distance Between Buildings _____
5. Intended Occupancy _____ Previous Occupancy _____
6. Will the building be occupied during renovations? ☐ Yes ☐ No
7. Will the project site be (check all that apply):
☐ Fenced ☐ Lighted ☐ Monitored by active security cameras ☐ Locked
☐ Monitored b watchmen during non-working hours ☐ Protected with Sprinkler System
☐ Protected with Sprinkler System Alarms

Signature of applicant (must be officer or owner)

Date

Printed name of applicant

Title

Please return this application to your insurance agent or broker.
Insurance Specialty Group | 3301 Windy Ridge Parkway, Suite 100 | Atlanta, GA 30339
Phone: 678-742-6300