

HARTFORD ADDITIONAL UNDERWRITING QUESTIONS FOR

OFFICE EXPOSURE

Please complete ALL 3 pages and submit with application.

1. Are work stations ergonomically designed at all locations?

Yes

No*

*If work stations are not ergonomically designed at all locations, please explain.

2. Are all employees provided with training/education on ergonomic issues?

Yes

No*

*If all employees are not provided with training/education on ergonomic issues, please explain.

3. Are all employees given appropriate training in how to act in the event of a robbery?

Yes

No*

*If the answer is no, please explain.

4. Insured's loss prevention controls include (select all that apply)

Insured has a written safety program

There is a preventive maintenance program in place for tools and equipment

A formal lockout/tag out program is in place for machinery

Machines and tools are properly guarded

Management is focused on safety and takes an active role in ensuring standards are adhered to

Insured has a documented vehicle preventive maintenance program

Other

None of the Above

Email to clahna@massagent.com or fax to (508) 634-2930
Colleen Lahna, WC Department, Number One Insurance Agency

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5. Does the insured have more than 50% interest in any other business?

Yes No

If the insured does have more than 50% interest in another business, is the other business listed as a named insured in this submission?

If the other business is not listed as a named insured in this submission, is it insured elsewhere?

If the other business is not insured elsewhere, explain why the business is not insured.

If the other business is insured elsewhere, is there an interchange of labor?

If there is no interchange of labor, provide the insured's other policy number, carrier and effective dates.

If the other business is listed as a named insured in this submission, are the appropriate payrolls and classes included in the submission?

If the appropriate payrolls and classes are not included, please explain why the exposures for the other business are not included in this submission.

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6. How many years of management experience in the trade does the business owner have?

7. How was the business started?

- Purchased
- Transfer of ownership
- Inherited
- New Start-up/New Venture

8. Please check all types of managerial experience in the trade in which the insured has engaged.

- Negotiating contracts with clients
- Owned another business previously
- Running Payroll
- Bidding on jobs
- Job site supervision
- Other HR duties
- Accounts Payable/Receivable
- Supervising sub-contractors
- Hiring Employees

9. Please comment on any other information regarding the insured's experience we should consider in our underwriting decisions.

10. Explain other loss preventive controls in place.

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