

CONTRACTOR SUPPLEMENTAL APPLICATION

Name of Applicant: _____

Website: _____

Detailed description of operations:

What percentage of work performed is: (totals must equal 100%)

	RESIDENTIAL	COMMERCIAL	OTHER
New Construction	_____	_____	_____
Renovation	_____	_____	_____
Totals	_____	_____	_____

Number of Employees: ____ Full-time Part-time ____ How many employees are over age 60? _____

Duties of employees over age 60:

Radius of operations: <50 miles ____ 50-100 miles ____ 100 + miles ____

Hiring and Safety Practices

Are owners active in daily operations?

Written applications?

Background checks?

Reference checks?

Are personnel files documented for pre-existing injuries?

Pre-hire drug testing?

Post accident drug testing?

MVR checks?

Are safety meetings conducted?

Describe personal protective equipment that is provided and required:

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Any work subcontracted out? If so, please provide the percentage: _____

Are solar panels installed? _____ Any work performed on roofs or above 15ft? _____ If "yes" to either, please describe: _____

Any confined space exposures requiring respiratory assistance devices, atmospheric monitoring/probing, and/or personnel extraction devices? _____ Any high voltage work (>480volts)? _____ Any exposure to USL&H or Jones Act? _____ Any bucket trucks or boom lifts utilized?

Type of Work	% Dir	% Sub	Type of Work	% Dir	% Sub	Type of Work	% Dir	% Sub
Airport Work			Excavation			Plumbing		
Blasting			HVAC			Roofing		
Bridge Construction			Grading			Sewer		
Carpentry			Insulation			Solar Panels		
Concrete			Maintenance			Steel Erection		
Demolition			Masonry			Street & Road Construction		
Drilling			Mechanical			Supervisor Only		
Drywall			Painting					
Electrical			Plastering					
Other (Describe)			Water/Gas Main					

Thank you for providing this important information

Signature of Person Completing This Application

Title

Date Signed