

**ROBERT W. SCHMIDT & COMPANY**  
3505 North 124th Street  
Brookfield, WI 53005-2489

**WRECKING OF BUILDING (Per Job Basis)**  
**GENERAL LIABILITY SUPPLEMENT**  
(Include Acord application)

Applicant's Name: \_\_\_\_\_ Location Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Number of years in business: \_\_\_\_\_ Years in demolition business: \_\_\_\_\_

Average number of employees: \_\_\_\_\_

Has applicant or any other person for whom coverage is being requested, ever been fined or cited for performing unsafe work?  Yes  No

Is applicant fully engaged in, owned by, associated with or involved in any other enterprise?  Yes  No

If yes, provide details: \_\_\_\_\_

Estimated receipts for coming year: Demolition: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

Estimated payroll for coming year: Demolition: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

Provide details of licensing or certification needed for this operation: \_\_\_\_\_

Do you have a standard contract that you use?  Yes  No If yes, furnish copy.

Is there a written contract for this job?  Yes  No

Describe your two (2) largest jobs, including size of building (number of stories), method of demolition and job cost: \_\_\_\_\_

Give location and description of building to be demolished, including number of stories and type of construction: \_\_\_\_\_

What is the job cost? \$ \_\_\_\_\_

How demolished? (by hand, wrecking ball, etc.): \_\_\_\_\_

Describe equipment to be used: \_\_\_\_\_

How is equipment transported to and from job site? \_\_\_\_\_

Number of cranes owned (include age, type, size, and weight) \_\_\_\_\_

Are cranes leased to others?  Yes  No If yes, with operators?  Yes  No

Will you use explosives?  Yes  No Are there abutting walls?  Yes  No

Will the area be barricaded?  Yes  No If yes, how high? \_\_\_\_\_ feet

What other safety precautions will be taken? \_\_\_\_\_

Do you check for asbestos, hazardous materials and/or PCBs before beginning demolition?  Yes  No

Do you obtain written confirmation that all utilities have been turned off? (gas, water and electric)

Yes  No

Will you retain the salvage?  Yes  No Briefly describe: \_\_\_\_\_

How is debris removed? \_\_\_\_\_

Do you obtain certificates of insurance from all subcontractors?  Yes  No

Minimum requirements required: \$ \_\_\_\_\_

Do you have a formal safety program?  Yes  No

Briefly describe: \_\_\_\_\_

