



JANITORIAL SUPPLEMENT
(Include Acord application)

Applicant's Name: _____ Location Address: _____
 Mailing Address: _____

Mix of business: Commercial _____% Industrial _____% Residential _____%

Employee Data	Number	Annual Payroll	* Do independents provide you with certificates of insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No
Owner(s) only		\$	
Employees (excluding clerical) Full-time		\$	
Employees (excluding clerical) Part-time		\$	
Leased or Subcontracted	Number	Annual Cost	
Leased Employees		\$	
Independent Contractors *		\$	

Indicate annual sales for each of the following industries serviced:

Operations for	Annual Sales	Work done during business hours	Operations for	Annual Sales	Work done during business hours
Aircraft	\$		Offices	\$	
Apartments	\$		Off-shore oil rigs	\$	
Construction Make-Ready	\$		Private Residences	\$	
Convenience Stores, Grocery Stores and Supermarkets	\$		Retail Stores	\$	
Convention Halls	\$		Schools/Colleges/Universities	\$	
Crime Scene Cleanup	\$		Shopping Centers & Malls	\$	
Department Stores	\$		Sports Complexes	\$	
Hospitals/Convalescent Homes	\$		Transportation Terminals	\$	
Hotels	\$		Theaters	\$	
Other (describe) _____	\$		Industrial	\$	
			Total Annual Sales:	\$	

Type of operations performed: (Show sales figures for bolded operations)

Operation	Payroll/Sales	Operation	Payroll/Sales
Carpentry	\$	Painting	\$
Carpet/Upholstery Cleaning	\$	Pressure Washing	\$
Construction Cleanup <input type="checkbox"/> Interior <input type="checkbox"/> Exterior	\$	Recycling	\$
Consulting	\$	Sandblasting	\$
Equipment Rental	\$	Security	\$
Floor Stripping/Waxing	\$	Snowplowing	\$
Flood/Fire Cleanup	\$	Restaurant Hood Cleaning	\$
Janitorial – General Services	\$	Window/Screen/Skylight cleaning	\$
Janitorial Supply Retail/Wholesale	\$	Machinery/Equipment clean/degrease	\$
Landscaping/plant or shrub servicing	\$	Other (describe)	\$

Window Cleaning: _____ Max. number of stories: _____ Scaffolding/rigging, if any Rented Owned
 Please provide a brief description of any hazardous waste handled, storage of combustible material, and recyclables handled?

Are your employees bonded? Yes No

Attach a copy of applicant's standard contract.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature _____ Producer's Signature _____ Date _____