



Masonry Contractor Questionnaire

Name Insured: _____

Producer: _____

- 1 Has this risk been in business with Workers' Comp Insurance for 3 yrs or more? YES NO
- 2 Does risk hire "Day Laborers"? YES NO
- 3 Does risk have a current and active contractor's license? YES NO
- 9 What % of this risk's work is Commercial % Residential %
- 10 What % of this risk's work is remodel/repair? % New %
- 11 Is risk a union contractor? YES NO
- 12 What is the average hourly wage for class 5222 (Masonry)
- 13 Does risk perform work at heights greater than one story? YES NO
a. If "Yes", estimate the % of this to total work performed.
- 14 Please provide a description of masonry construction over one story and how it is performed (i.e. scaffolding inside or outside structure)

- 16 Has risk been cited for any OSHA violations in last 3 years? YES NO
- 17 Does risk have a New Hire Orientation Program with pre-hire physicals, drug screenings etc? YES NO
- 18 Are safety meeting held on at least a quarterly basis; do managers and employees attend, and are attendance records kept? YES NO
If less than quarterly, how often?
- 19 Does this risk have a formalized safety incentive program? YES NO
If so give a description.

- 20 Does risk have a full-time Safety Director on staff with no additional duties? YES NO
- 21 Is there a formal accident investigation program? YES NO
- 22 Does this risk have a formal Return To Work Program in place? YES NO
- 23 Does perform pre-hire and post accident drug testing? YES NO
- 26 Are MVR's ordered on new employees before hire and then annually? YES NO
- 27 Health benefits? YES NO
Employee Participation % Employer's Contribution %
- 28 Does risk hire subcontractors? YES NO If "Yes" what is the % %

- a. Does risk obtain Certificates of Insurance from all subs? YES NO
- b. Does the risk use a diary system to track the expiration dates of COI's? YES NO
- 29 Please provide four years of premium and payroll information.

Policy Term	Premium	Payroll
Expiring		
1st prior		
2nd prior		
3rd prior		

Type in name of individual completing questionnaire

Dated