

EZ Contractors Quotes

Name: _____ Phone _____
Business Name; _____ email: _____
Number years in business _____ Number Years experience _____
Contractors License number: _____

Type of contractor: _____
Describe Operations: _____

Work Performed: (please give percentage)
Residential _____ Commercial _____ Industrial _____
Inside _____ Outside _____ Shop only _____
Ground up Construction: _____ Remodel or Repair _____
Room Additions: _____

Gross Receipts; _____ Payroll _____ # Employees _____

Any work done for a Developer or Tract development of new single family homes? _____
Is so, number of homes in development _____
Any work preformed on new construction of Condo's or Townhomes? _____

Prior Insurance Company _____ Exp. Date _____ Premium _____

If no prior insurance, please explain why? _____
If new venture please give date business started: _____
Give details of Experience: _____

Any Claims or Losses in the last 5 tears? _____

Contractors Equipment Coverage: Type of equipment _____
Total Limit of Coverage all items under \$500.00 _____
Limit of Values per item over \$500.00: _____

K&M Henderson Insurance Services
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