



Builders Risk Coverage Application

GENERAL INFORMATION

Named Insured:

Company Name:

Contact Name:

Email:

Phone:

General Contractor:

Company Name:

Contact Name:

Email:

Phone:

Project Owner:

Agency Name:

Contact Name:

Email:

Phone:

PROJECT INFORMATION

Project Overview:

Project Name:

Project Address/ Or Coordinates:

Estimated Start Date:

Estimated Completion Date:

Select One of the following by checking a box

☐ < New Project

☐ < Demo/Rebuild

☐ < Remodel

☐ < Addition to Existing Structure

Division of Risk Management ID#, if not a new project:

Building # (if applicable):

DFCM Project#(if applicable):

Project Values:

Contract Sum:

Value of Existing Structure (if applicable):

Completed Building Value:

Project Description:

Provide a brief description of the project. Please note that this policy does not cover infrastructure.
If coverage for infrastructure is needed, please contact Risk Management for other options for coverage.

Project Details:

Will the building be occupied during construction? Yes -or- No

Select type of Structural Frame by checking a box:

ISO Fire code description below 0 1 2 3 4 5 6

Total Square Footage:

Stories Above Ground:

Stories Below Ground:

Protection and Site Security

Fire Alarms: Yes -or- No

Sprinklers: Yes -or- No If Yes at what % of completion are the sprinklers fully operational?

Is Hot Work part of this project? Yes -or- No If Yes, is there a written fire protecting plan?

Additional Comments:

ISO Fire Code	Construction Description	Detailed Description
0	Unknown	Unknown
1	Frame	Buildings having wood exterior walls or other combustible materials including construction where combustible materials are combined with other materials such as brick veneer, stone veneer, iron cladding, or stucco on wood.
2	Joisted Masonry	Buildings having masonry exterior walls, such as stone, adobe, brick, clay tile, concrete block, or concrete, with combustible joisted wood floors and roof.
3	Non-Combustible	Buildings having walls and floors constructed of, and supported by non-combustible materials such as metal, concrete, asbestos, gypsum, or fire-proofed steel.
4	Masonry Non-Combustible	Buildings having exterior walls constructed of unit masonry, such as stone, adobe, brick, clay tile, or concrete block, with floors and roof of metal or other non-combustible material.
5	Modified Fire Resistive	Buildings having exterior walls, floors, and roof constructed of masonry or other fire-resistive material with a fire resistance rating of one hour or more, but less than two hours.
6	Fire Resistive	Buildings having exterior walls, floors, and roofs constructed of masonry or other fire-resistive material with a fire resistance rating of not less than two hours.

[>Click this link to view the Builders Risk Policy](#)

You Must Notify the contractor that in the event of loss or damage to the covered property, the insured must:

1. Notify the police if a law may have been broken.
2. Give the Utah Division of Risk Management ("Risk Management") notice of the physical loss or damage as soon as possible, but in no event not more than 72 hours after the loss or damage occurs. Include a description of the property involved and a description of how, when and where the loss or damage occurred.
3. Take all reasonable steps to protect the Covered Property from further damage and keep a record of your expenses necessary to protect the Covered Property, for consideration in the settlement of the claim. This will not increase the Limit of Insurance. Also, if feasible, set the damaged property aside and in the best possible order for examination and/or make no repairs until Risk Management has a reasonable opportunity to inspect the damaged property.
4. As often as it may be reasonably required, permit Risk Management to inspect the property proving the loss or damage and examine your books and records. Also, permit Risk Management to take samples of damaged and undamaged property for inspection, testing, and analysis, and permit us to make copies from your books and records.
5. Send Risk Management a signed, sworn proof of loss containing the information we request to investigate the claim. You must do this within 60 days of our request.
6. Cooperate with Risk Management in the investigation or settlement of the claim.

Attach a copy of the site plan and contract. Email the completed application and signed contract to Barbara Belliston at **bbelliston@utah.gov**