General Liability Insurance Questionnaire

1. Business Information

Business Name:

DBA (if applicable):

Business Address:

Mailing Address:

Business Phone:

Email:

Website:

Years in Business:

Type of Business / Industry:

Description of Operations:

Federal Tax ID / EIN:

2. Contact Information

Primary Contact Name:

Title/Role:

Phone:

Email:

General Liability Insurance Questionnaire (cont.)

3. Policy Details

Current Insurance Carrier:

Policy Expiration Date:

Desired Effective Date for New Policy:

Current Premium:

Any Lapses in Coverage? ☐ Yes ☐ No

4. Business Operations

Describe your operations in detail:

Annual Gross Receipts ($):

Annual Payroll ($):

Number of Employees:

Years of Experience in Industry:

Do you use subcontractors? ☐ Yes ☐ No

If yes, provide details:

General Liability Insurance Questionnaire (cont.)

5. Premises Information

Number of Locations:	
Location Addresses:	
Square Footage per Location:	

6. Contractor Information (if applicable)

Percentage of Residential Work	
Percentage of Commercial Work	
Do you require Certificates of Ins	

General Liability Insurance Questionnaire (final page)

7. Claims / Loss History (past 3–5 years)

8. Coverage Requested

- ☑ General Aggregate Limit $2,000,000
- ☑ Products/Completed Operations $1,000,000
- ☑ Personal & Advertising Injury $1,000,000
- ☑ Each Occurrence Limit $1,000,000 Damage
- ☑ to Rented Premises $100,000

9. Additional Comments or Notes