

# CONTRACTORS INLAND MARINE COVERAGES

## CBIC - Contractors Bonding and Insurance Company

1. Agent/Broker Name:	2. Company Name:
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### CONTRACTORS TOOLS AND EQUIPMENT COVERAGE (refer to CBIC if limit over \$50,000)

3. Equipment must be scheduled if total values exceed \$50,000 and/or any one piece of equipment exceeds \$2,500

<input type="checkbox"/> Blanket (Unscheduled) Coverage Limit: _____ Deductible: <input type="checkbox"/> \$500 <input type="checkbox"/> \$1,000 <input type="checkbox"/> \$2,500	<input type="checkbox"/> **Scheduled Coverage Limit: _____ Deductible: <input type="checkbox"/> \$500 <input type="checkbox"/> \$1,000 <input type="checkbox"/> \$2,500
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\*\*Attach equipment schedule including: Year, Description (Type, Manufacturer, Model, Capacity, etc.), ID No. / Serial No., Date Purchased and Value per item.

Is Equipment used underground? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is any Equipment rented, loaned to or from others with or without operators? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is any work done afloat? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Explain all yes answers:

### CONTRACTORS INSTALLATION COVERAGE

4. Per Job Site Limit / All Job Sites Limit

\$5,000 / \$15,000  \$10,000 / \$30,000  \$15,000 / \$45,000  \$20,000 / \$60,000  \$25,000 / \$75,000

Deductible:  \$500  \$1,000  \$2,500

Describe job site security for installation material:

Are any temporary structures (i.e., cribbing, scaffolding, construction forms) assembled or built on site?  Yes  No  
If yes, provide details:

### EMPLOYEE TOOLS COVERAGE

(refer to CBIC if limit over \$5,000)

5. Tools subject to a maximum of \$500 per employee and \$100 limit for any one tool

Employee Tools Limit: \_\_\_\_\_ Deductible:  \$500  \$1,000  \$2,500

### NON-OWNED (LEASED OR RENTED) TOOLS AND EQUIPMENT COVERAGE

(refer to CBIC if limit over \$50,000)

6. Non-Owned Tools and Equipment Limit: \_\_\_\_\_ Deductible:  \$500  \$1,000  \$2,500

### RENTAL COST REIMBURSEMENT COVERAGE

(refer to CBIC if limit over \$5,000)

7. The limit of recovery under this extension is 80% of the rental fee for substitute equipment after a 72-hour waiting period from time of loss

Rental Cost Reimbursement Limit: \_\_\_\_\_ Deductible:  \$500  \$1,000  \$2,500

### COMPUTER (ELECTRONIC DATA PROCESSING) EQUIPMENT COVERAGE

(refer to CBIC if limit over \$5,000)

8. Electronic Data Processing Equipment Limit: \_\_\_\_\_ Deductible:  \$500  \$1,000  \$2,500

NOTE: Electronic Data Processing Media and Records are included @ 25% of EDP Limit

### MISCELLANEOUS COVERAGE (MANUAL PREMIUM)

9. Description: \_\_\_\_\_ Limit: \_\_\_\_\_

Deductible:  \$500  \$1,000  \$2,500 Premium: \_\_\_\_\_