



# BUILDING EQUIPMENT INSTALLATION AND REPAIR PROGRAM (BEAR) SUPPLEMENTAL APPLICATION COMMERCIAL AFFILIATION MARKETING (CAM®)

APPLICANT NAME: \_\_\_\_\_ PRODUCER NAME: \_\_\_\_\_

APPLICANT CONTACT NAME: \_\_\_\_\_ PRODUCER EMAIL ADDRESS: \_\_\_\_\_

APPLICANT WEB SITE ADDRESS: \_\_\_\_\_ APPLICANT EMAIL ADDRESS: \_\_\_\_\_

DATE COMPLETE (DD/MM/YYYY): \_\_\_\_\_

**Definitions of *italicized* terms are provided at the end of this supplement.**

## ELIGIBILITY

- ATTACH A JOB LIST OR A CERTIFICATE HOLDER LIST FOR THE LAST THREE YEARS AND YOUR BID LIST FOR THE NEXT 12 MONTHS.
- IS THE APPLICANT A MEMBER OF A TRADE ASSOCIATION?      YES      NO  
IF 'YES', PLEASE SELECT FROM THE FOLLOWING BELOW (PROVIDING THIS INFORMATION IS OPTIONAL AND MEMBERSHIP IN AN ASSOCIATION IS NOT A BEAR PROGRAM REQUIREMENT).

- NGWA (LIST STATE CHAPTER) \_\_\_\_\_
- ABC NATIONAL
- ABC (LIST STATE CHAPTER) \_\_\_\_\_
- AGC
- CFMA
- OTHER \_\_\_\_\_

NOTE: MEMBERSHIP IN A TRADE ASSOCIATION IS **NOT** A REQUIREMENT FOR INSURABILITY.

- APPLICANT IS OPERATING AS: (DEFINITIONS OF ITALICIZED TERMS ARE PROVIDED ON THE LAST PAGE)  
*CONSTRUCTION MANAGER* \_\_\_\_\_%  
*GENERAL CONTRACTOR* \_\_\_\_\_%  
*PRIME CONTRACTOR* \_\_\_\_\_%  
*SUBCONTRACTOR* \_\_\_\_\_%

- ENTER THE PERCENTAGE OF THE APPLICANT'S OWN PAYROLL AND/OR SALES THAT EMANATE FROM THE FOLLOWING OPERATIONS. EXCLUDE WORK THAT THE APPLICANT SUBCONTRACTS WHEN DETERMINING ELIGIBILITY PERCENTAGES.

PERCENTAGES BASED ON: (CHECK ONE)      PAYROLL      SALES

- MILLWRIGHT WITH RIGGING \_\_\_\_\_%
- WATER WELL DRILLING \_\_\_\_\_%
- EQUIPMENT INSTALLATION \_\_\_\_\_%
- TOTAL** \_\_\_\_\_%

IF THE TOTAL IS **LESS THAN 75%**, THE APPLICANT MAY **NOT** BE ELIGIBLE FOR THE BEAR PROGRAM, BUT MAY STILL BE ELIGIBLE FOR CNA COVERAGE. PLEASE REFER TO THE ECCP AND SMAP PROGRAMS TO DETERMINE IF APPLICANT MAY BE ELIGIBLE FOR ONE OF THOSE PROGRAMS.

RIGGING \_\_\_\_\_%

DESCRIBE RIGGING WORK: \_\_\_\_\_

NOTE: CERTAIN RIGGING OPERATIONS ARE ELIGIBLE WITHIN THE PROGRAM IN CONJUNCTION WITH ABOVE OPERATIONS BUT MUST NOT BE THE PREDOMINANT OPERATION.

- DOES THE APPLICANT LEASE OR RENT CRANES TO OTHERS (WITH OR WITHOUT OPERATORS) IN ADDITION TO THEIR OWN SELF-PERFORMED MILLWRIGHT OPERATIONS?      YES      NO  
IF 'YES', THE APPLICANT IS **INELIGIBLE** FOR THE **BEAR** PROGRAM.

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6. DOES THE APPLICANT GET INVOLVED IN ANY OF THE FOLLOWING OPERATIONS?
- AMUSEMENT PARKS            YES        NO  
 CRANE RENTAL OR LEASING TO OTHERS            YES        NO  
 DEMOLITION OF BUILDINGS            YES        NO  
 EXTERIOR CLEANING            YES        NO  
 BLASTING            YES        NO  
 MINING INDUSTRIES            YES        NO
- ENVIRONMENTAL OR POLLUTION WORK INCLUDING BUT NOT LIMITED TO PLACEMENT AND/OR DEPTH DETERMINATION OF MONITOR WELLS AT EPA DESIGNATED SITES (A, B OR C)            YES        NO
- DERRICKING            YES        NO  
 HELICOPTER LIFTS            YES        NO  
 INDUSTRIAL CHEMICAL/GAS WORK            YES        NO  
 EFS, LEAD, ASBESTOS OR SIMILAR ABATEMENT WORK            YES        NO  
 IRON OR STEEL ERECTION UNLESS INCIDENTAL AND LESS THAN 20 FEET IN HEIGHT            YES        NO  
 PETROCHEMICAL AND OIL REFINERIES. NUCLEAR, ELECTRIC, HYDROELECTRIC OR GAS UTILITIES            YES        NO  
 PASSENGER OR FREIGHT ELEVATOR WORK; ESCALATOR AND/OR MOVING WALK-WAYS            YES        NO  
 AUTOMOBILE SERVICE STATION WORK            YES        NO  
 HOSPITAL OR MEDICAL GAS SYSTEMS            YES        NO  
 DAMS, COFFERDAMS AND/OR CAISSON WORK            YES        NO  
 OIL OR GAS DRILLING            YES        NO  
 SCAFFOLDING OPERATIONS            YES        NO  
 LIFT SYSTEMS INVOLVING ROBOCRANES, TWIN LIFTS, DUAL LIFTS AND/OR CLIMBING TOWERS            YES        NO  
 RESIDENTIAL WORK SUCH AS HIGH-RISE CONDOMINIUM HEATING/COOLING CONDENSORS            YES        NO
- ANSWERS TO THE ABOVE QUESTIONS WILL DETERMINE UNDERWRITING ELIGIBILITY FOR THIS OR OTHER CNA PROGRAMS OR COVERAGE.

7. IS THE APPLICANT PAYROLL LESS THAN \$500,000 FOR MILLWRIGHT OPERATIONS OR \$200,000 FOR WATER WELL DRILLING OPERATIONS?            YES        NO  
 IF 'YES', THE APPLICANT MAY BE INELIGIBLE FOR THE BEAR PROGRAM, BUT MAY STILL BE ELIGIBLE FOR CNA COVERAGE.

8. DOES THE APPLICANT GET INVOLVED IN ANY OF THE FOLLOWING OPERATIONS?
- WORK WHERE THE ENTIRE PRODUCTION LINE OF A FACILITY IS SHUT DOWN FOR EXTENDED PERIODS            YES        NO  
 OVERNIGHT OR OUT-OF-TOWN OPERATIONS WHERE EMPLOYEE IS SUBJECT TO EXTENDED TRAVEL            YES        NO  
 WORK THAT INVOLVES REMOVING ASBESTOS AS PART OF EQUIPMENT BEING DISMANTLED            YES        NO  
 NIGHTTIME OPERATIONS            YES        NO

9. HAS THE APPLICANT BEEN CITED FOR ANY OSHA VIOLATIONS IN THE LAST THREE YEARS?            YES        NO  
 IF 'YES', PLEASE PROVIDE DETAILS: \_\_\_\_\_

10. IN THE TABLE BELOW, INDICATE THE PERCENTAGE OF THE APPLICANT'S TOTAL PAYROLL OR SALES DURING THE PAST 3 YEARS THAT EMANATE FROM THE FOLLOWING TYPES OF WORK. **INCLUDE ALL WORK, WHETHER SELF-PERFORMED OR SUBLET TO OTHER CONTRACTORS. SUBLET WORK SHOULD BE CLASSIFIED ACCORDING TO THE TYPE OF PROJECT (COMMERCIAL, INDUSTRIAL OR RESIDENTIAL/HABITATIONAL).** WATER WELL DRILLING OPERATIONS AT RESIDENTIAL OR HABITATIONAL PROPERTIES THAT INVOLVE DIRECT CONNECTIONS TO THE HOME SHOULD BE CLASSIFIED AS RESIDENTIAL & HABITATIONAL.  
 PERCENTAGES BASED ON: (CHECK ONE)            PAYROLL            SALES

	CURRENT YEAR	1 <sup>ST</sup> PRIOR YEAR	2 <sup>ND</sup> PRIOR YEAR
COMMERCIAL WORK	_____ %	_____ %	_____ %
INDUSTRIAL WORK	_____ %	_____ %	_____ %
PROVIDE BREAKOUT OF ALL TYPES OF WORK FOR <i>RESIDENTIAL/HABITATIONAL</i> PROJECTS, INCLUDING WORK THAT IS SUBLET TO OTHER CONTRACTORS. FOR WATER WELL DRILLING OPERATIONS, ONLY LIST WORK THAT INCLUDES DIRECT CONNECTIONS TO <i>RESIDENTIAL/HABITATIONAL</i> STRUCTURES. NOTE: WHEN THERE IS NO INDIVIDUAL OWNERSHIP OF UNITS, RESIDENTIAL DOES NOT INCLUDE MILITARY HOUSING, COLLEGE/ UNIVERSITY HOUSING OR DORMITORIES, LONG TERM CARE FACILITIES, HOTELS OR MOTELS. RESIDENTIAL STRUCTURE ALSO DOES NOT INCLUDE HOSPITALS OR PRISONS.	_____ %	_____ %	_____ %

**NOTE THAT WATER WELL DRILLING OPERATIONS THAT INVOLVE DIRECT CONNECTIONS TO RESIDENTIAL/HABITATIONAL STRUCTURES MAY BE INELIGIBLE FOR THE BEAR PROGRAM, BUT MAY STILL BE ELIGIBLE FOR CNA COVERAGE.**

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11. DOES THE APPLICANT HAVE ANY FUTURE PLANS RELATED TO WORK INVOLVING *RESIDENTIAL/HABITATIONAL*? YES NO  
 IF 'YES', PLEASE DESCRIBE: \_\_\_\_\_
12. LIST THE STATES THE APPLICANT WORKED IN DURING THE LAST 5 YEARS: \_\_\_\_\_
13. HAS THE APPLICANT EVER INSTALLED OR HAVE ANY FUTURE PLANS INVOLVING *EXTERIOR FINISH SYSTEMS*? YES NO
14. HAS THE APPLICANT EVER BEEN NAMED IN CLAIMS AND/OR LITIGATION REGARDING FAULTY OR DEFECTIVE CONSTRUCTION OR WORKMANSHIP, INCLUDING CLAIMS DUE TO *EXTERIOR FINISH SYSTEMS*? YES NO  
 IF 'YES', WAS APPLICANT ACTING AS A GENERAL OR SUB-CONTRACTOR? YES NO  
 IF 'YES', WAS IT A *RESIDENTIAL/HABITATIONAL* OR COMMERCIAL PROJECT? YES NO  
 PROVIDE DETAIL ON CLAIMS/LITIGATION AND HOW THE ISSUE WAS CORRECTED:  
 \_\_\_\_\_
15. DOES APPLICANT HAVE KNOWLEDGE OF ANY PRE-EXISTING ACT, OMISSION, EVENT, CONDITION OR DAMAGES TO ANY PERSON OR PROPERTY THAT MAY POTENTIALLY GIVE RISE TO ANY FUTURE CLAIM OR LEGAL ACTION? YES NO  
 IF 'YES', PLEASE DESCRIBE: \_\_\_\_\_
16. ANY CURRENT OR PAST INVOLVEMENT WITH A **COMMERCIAL OR INDUSTRIAL** *WRAP-UP/OCIP/CCIP*? YES NO  
 ANY CURRENT OR PAST INVOLVEMENT WITH A **RESIDENTIAL OR HABITATIONAL** *WRAP-UP/OCIP/CCIP*? YES NO
17. DOES THE APPLICANT HAVE A QUALITY CONTROL PROGRAM? YES NO  
 IF 'YES', IS IT (CHECK ONE): INFORMAL DOCUMENTED
18. DOES THE APPLICANT HIRE SUBCONTRACTORS? IF YES, COMPLETE THE FOLLOWING QUESTIONS. YES NO  
 LIST THE TYPES AND PERCENTAGES OF WORK SUBCONTRACTED: \_\_\_\_\_%  
 DOES THE APPLICANT OBTAIN CERTIFICATES OF INSURANCE FROM ALL SUBCONTRACTORS? YES NO  
 DOES THE APPLICANT REQUIRE ALL SUBCONTRACTORS TO CARRY PRIMARY LIMITS EQUAL TO OR GREATER THAN THEIR OWN? YES NO  
 IS THE APPLICANT NAMED AS AN ADDITIONAL APPLICANT ON ALL SUBCONTRACTORS' POLICIES? YES NO  
 DOES THE APPLICANT USE WRITTEN SUBCONTRACTOR AGREEMENTS CONTAINING HOLD HARMLESS/INDEMNITY AGREEMENTS IN FAVOR OF THE APPLICANT?  
 YES NO  
 IS THERE A DIARY SYSTEM IN PLACE TO TRACK EXPIRATION DATES OF CERTIFICATES OF INSURANCE? YES NO
19. INDICATE THE TYPES OF SUBCONTRACTOR AGREEMENTS THE APPLICANT TYPICALLY SIGNS.  
 STANDARD (AGC, AIA CONTRACTS; CONSENSUS DOCS)  
 CUSTOM  
 OTHER \_\_\_\_\_
20. DOES THE APPLICANT HAVE AN ARCHITECT OR ENGINEER ON STAFF? YES NO  
 IF 'YES', DOES THE APPLICANT CARRY PROFESSIONAL LIABILITY INSURANCE? YES NO  
 IF 'NO', DOES THE APPLICANT REQUIRE THAT THE ARCHITECT OR ENGINEER CARRY HIS/HER OWN PROFESSIONAL LIABILITY INSURANCE? YES NO
21. DOES THE APPLICANT PERFORM **ANY** WORK AT OR NEAR NUCLEAR FACILITIES? HAS THE APPLICANT DONE SO IN THE PAST? WILL THE APPLICANT DO SO IN THE FUTURE, IF THE OPPORTUNITY ARISES? YES NO  
 PLEASE EXPLAIN ANY 'YES' RESPONSES BELOW: \_\_\_\_\_
22. SAFETY PROGRAM  
 DOES THE APPLICANT EMPLOY A FULL-TIME SAFETY DIRECTOR AND HAVE A WRITTEN SAFETY PROGRAM? YES NO  
 DOES THE SAFETY PROGRAM INCLUDE DRIVER SELECTION AND TRAINING REQUIREMENTS? YES NO  
 DOES THE APPLICANT HAVE A DRUG TESTING PROGRAM? YES NO  
 DOES THE APPLICANT HAVE A DOCUMENTED AND ENFORCED JOB SITE SAFETY PROGRAM? YES NO  
 DOES THE APPLICANT RETAIN JOB FILES? YES NO  
 IF 'YES', HOW LONG? \_\_\_\_\_  
 ARE SAFETY MEETINGS HELD ON A QUARTERLY BASIS; DO MANAGERS AND EMPLOYEES ATTEND; AND ARE ATTENDANCE RECORDS KEPT? YES NO  
 IF LESS THAN QUARTERLY, HOW OFTEN? \_\_\_\_\_

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DOES THE APPLICANT HAVE A NEW HIRE ORIENTATION PROGRAM WITH PRE-PHYSICALS, DRUG SCREENING, ETC.?

YES

NO

PRODUCER'S SIGNATURE

DATE

APPLICANT'S SIGNATURE

DATE

**DEFINITIONS**

**Construction Manager:** entity that administers the construction contract throughout the planning, design and construction phases of the project but does no actual design or construction (pure agency construction manager), or who provides construction advice and construction leadership on a project during the planning and design stages and also provides construction leadership, contract management, direction, supervision, coordination and control of the work during the construction phase (at risk construction manager).

**Exterior Finish Systems:** Multi-layered exterior wall systems including EIFS, which resemble stucco in appearance, that are used on both commercial buildings and residential homes.

**General Contractor:** A contractor who subcontracts work to others in excess of 50% of their total receipts, exercises primary control of the job site, and is named in the construction documents as the general contractor of record.

**Prime Contractor:** Principle contractor on a project; any contractor on a project having a contract directly with the owner.

**Residential/Habitational:** Any structure where 30% or more of the square foot area is used or is intended to be used for human residency including but not limited to: single or multi-family housing, apartments, condominiums, townhouses, co-operatives or planned unit developments, and also includes their common areas and/or appurtenant structures (including pools, hot tubs, detached garages, guest houses or any similar structures). When there is no individual ownership of units, residential structure does not include military housing, college/university housing or dormitories, long term care facilities, hotels, or motels. Residential structure also does not include hospitals or prisons.

**Wrap-up/OCIP/CCIP:** A policy providing coverage(s) for all interests in a major construction project. An OCIP is an Owner Controlled Insurance Program; a CCIP is a Contractor Controlled Insurance Program.

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