

**Water Well Contractors Insurance Program
Supplemental Questionnaire**



PROGRAM UNDERWRITERS

Insured's/Applicant Name: _____ Insured's Web site: _____

APPLICANT SECTION

If a question in this application is not applicable to your business, please mark N/A

1. Year business was established: _____ FEIN: _____
2. Are you a current member of the NGWA or any state or regional water well drilling association? Yes No
If yes, please list: _____
3. Risk acts as a: _____ Prime Contractor: _____ % Subcontractor: _____ %
4. Please attach copies of:
 - Four years of currently valued loss runs.
 - Copy of most currently used subcontractor agreement, including insurance and indemnification provisions.
 - List of all possible drivers, including family members who may have occasional use of company vehicles.
 - Copies of Safety and Drug Free Workplace policies, if any

OPERATIONS

5. Does your company perform any operations as the Prime Contractor or as the Subcontractor directly or indirectly for the oil and/or gas drilling or mining industry? Yes No
If yes, please describe: _____
6. What percentage of your revenue is generated from the following operations?
 - Domestic Water Well Drilling _____%
 - Industrial Water Well Drilling _____%
 - Geothermal Drilling _____%
 - Environmental Drilling _____%
 - Construction Drilling _____%
 - Commercial Water Well Drilling, Including Municipal _____%
 - Agricultural Irrigation _____%
 - Core Drilling _____%
 - Pump Installation, Repair or Service _____%
 - Other (e.g. wells used for livestock watering, filling ponds or lakes, golf course irrigation, landscapes, parks, etc.) Describe: _____%
7. For Industrial, Commercial, and Municipal Water Well Drilling, specify the type of work performed: _____
8. For pump installation, repair or service, do you or your subcontractors perform the direct connections to buildings? Yes No
9. Do you perform or subcontract any plumbing operations inside the premises? Yes No
10. For Environmental Drilling, do you perform or subcontract:
 - Dewatering Wells Yes No
 - Remediation Yes No
 - Any work at oil, gas drilling or mining sites: Yes No
 - Monitoring Wells Yes No
 - Installation Yes NoIf yes, describe: _____
11. Do you perform or subcontract any pollution monitoring, testing, or installation at hazardous waste or superfund sites A, B, C or D? Yes No
If yes: _____ A% _____ B% _____ C% _____ D%
12. With regard to monitoring wells, do you site the well or work under the direction of an engineer? _____
13. Do you perform any **Water Well** hydro fracture work? Yes No
If Yes: < 3000 PSI > 3000 PSI
If > 3000 PSI, explain: _____
14. Do you use chemicals in the process, other than potable water/chlorine? Yes No

Water Well Contractors Insurance Program Supplemental Questionnaire

If Yes, explain: _____

15. Water Well drilling exposures in depth:
 < 500 ft. _____ % 500 – 1,000 ft. _____ % 1,000 – 1,500 ft. _____ % > 1,500 ft. _____ %
16. Does the business perform or subcontract any past, current or future operations in the states of OR, AR, HI, SC, LA, CO, or in New York City or the five Boroughs? Yes No
17. Does the business perform or subcontract any WrapUp projects? Yes No
18. Do you perform or subcontract any **Blasting** Operations? Yes No
- If yes:
- Are you and/or your subcontractors certified or permitted by the state? Yes No
 - What type of blasting ops and how many times per year, explain: _____
 - Do you complete pre-blasting surveys? Yes No
 - Are seismographic readings performed? Yes No
 - Do you follow ATF guidelines for storage and transportation of explosives? Yes No

SUBCONTRACTORS

19. What percentage of your work is subcontracted compared to revenue? _____ %
20. Type of work you subcontract, explain: _____
21. Do you require a written contract with defense, indemnification and hold harmless language in your favor? Yes No
22. Do you require to be named as an additional insured? Yes No
23. Do you obtain Certificates of Insurance from subcontractors? Yes No
24. Minimum Limits of Liability required of subcontractors?
- Auto Liability \$ _____ • General Liability \$ _____ • Umbrella \$ _____
 - Workers Comp \$ _____

CONTRACTORS EQUIPMENT / DRILL RIGS

25. Where required, is all heavy equipment, including drill rigs operated by properly certified individuals? Yes No
26. Is all heavy equipment, including drill rigs, properly secured to trailers or trucks, per Federal Motor Carrier Safety Administration guidelines, or state regulations? Yes No
27. Does Insured follow enforced written guidelines on equipment fueling? Yes No
28. Is heavy equipment, including drill rigs, equipped with proper fire extinguishers? Yes No
29. Is equipment valued > \$50,000 equipped with GPS or similar tracking device? Yes No
30. Is equipment valued > \$50,000 registered with National Equipment Registry or similar program? Yes No
31. Is equipment left on a job site, or overnight, immobilized (booted, kill switches, keys removed, electronic devices removed, if not permanently installed)? Yes No
32. Is equipment bar coded or have other identifiable markers? Yes No
33. Are your drill rigs equipped with manufacturer installed hydraulic levelers/outriggers? Yes No
34. Do you always use a two man team when driving a drill rig onto a job site? Yes No
35. Is a job site survey performed to determine the safest route? Yes No
36. Are ground conditions inspected and monitored for stability to prevent sinkhole, landslide, tip overs, etc., resulting in rig losses? Yes No
37. Is there a formal daily checklist for inspection prior to operations of equipment? Yes No
38. Is there a formal maintenance policy in place where weekly and monthly inspections of equipment and vehicles is done by a qualified technician? Yes No
- Repairs performed by you or by third party? _____
39. What are the maintenance requirements for checking and replacing hydraulic hoses?

**Water Well Contractors Insurance Program
Supplemental Questionnaire**

40. When equipment and vehicles are stored, are they space/dispersed in such a way that if a loss was to occur that the loss would be limited? Yes No

EQUIPMENT LEASING

41. Do you rent or lease equipment of any type **to others**? Yes No
If yes: With operator Without operator
Revenue \$ _____ Avg. value of equipment leased: \$ _____
42. Do you rent or lease equipment of any type **from others**? Yes No
If yes: With operator Without operator
Revenue \$ _____ Avg. value of equipment leased: \$ _____
43. Do you always use a contract for rental or leasing? Yes No

PROFESSIONAL EXPOSURES

44. Do you perform or subcontract any consulting or testing operations? Yes No
If yes, describe: _____
45. Do you perform or subcontract the analysis of soil or water samples? Yes No
If yes, describe: _____
46. Do you make recommendations, warranties or guarantees, based on the results of soil/water samples? Yes No
47. Do you carry professional liability insurance? Yes No
If no, do you require that any employee on your staff performing testing, consulting, analysis of soil or water samples, etc., carry professional liability insurance? Yes No
48. Do you make any guarantees or warranties as to pressure, quality, or potability of water? Yes No

EMPLOYEE SELECTION AND SAFETY PROGRAM

49. Do you have procedures in place to contact the "Call Before You Dig" or similar program to verify above/below ground utilities? Yes No
50. Do all job sites require full time supervision and a site supervisor/foreman with at least three years trade experience? Yes No
51. Do you conduct regular work site inspections? Yes No
52. Is a pre-drill/site inspection check off sheet used before operations start each day at the site and signed off by the site manager? Yes No
53. Do you have a full time, dedicated safety professional on staff? Yes No
54. Does your company require utilization of Personal Protective Equipment? Yes No
55. Are power tools and equipment:
- In safe operation condition and guarded? Yes No
 - Inspected at regular intervals? Yes No
56. Is access to job sites, storage yards and owned business premises:
- Fenced? Yes No
 - Secured? Yes No
 - Lighted? Yes No
57. Employee selection process:
- Application Interview References Pre-placement Physical
58. Do you have a formal Drug Testing Program?
- Random Pre-employment Post Accident Probable Cause
59. What is the average years of experience for your drilling operators? # of Years: _____

**Water Well Contractors Insurance Program
Supplemental Questionnaire**

60. What professional designations/certifications are required?
 CWD CPI DWD/PI MGWC other: _____
61. Do you provide a formal safety training program for your staff? Yes No
If yes, how often? _____
62. Formal Quality Control Program? Yes No
Describe: _____
63. Are Drivers required to have a CDL? Yes No
MVR's Reviewed in house? Yes No
64. Personal use of company vehicles is allowed? Yes No
Do employees use own vehicles? Yes No
How often? _____

POLLUTION EXPOSURES

65. Do you enter into hold harmless agreements with respect to assumption of pollution liability? Yes No
If Yes, please describe: _____
66. With respect to the loss control program addressing pollution exposure:
- a. Are there procedures in place on handling hazardous material spills/accidents? Yes No
 - b. Is a formal accident investigation program in place? Yes No
 - c. Is there a disaster and emergency plan in place? Yes No
 - d. If Yes to any of the above, please describe: _____
67. Has any person, entity or government agency ever investigated or brought a cause of action against you/your company regarding an actual or alleged pollution incident? Yes No
If Yes, please describe: _____
68. Provide a detailed list of all pollution incidents insured or uninsured you've ever had. Provide total incurred value of loss, including expense and valuation date.