

## Contract Surety Questionnaire

**Legal Name of Company:**  **Date Business Established:**   
**Type of Entity:**     Corporation     Partnership     Sole Proprietorship     Joint Venture  
**CRA Business Number:**  **Website:**   
**Email Address:**  **Cell / Mobile:**   
**Street:**  **Telephone:**   
**City:**  **Province:**  **Postal Code:**

### 1. List of all Owners

<b>Name / Holdco:</b> <input type="text"/>	<b>DOB:</b> <input type="text"/>	<b>Since:</b> <input type="text"/>	
<b>Home Address:</b> <input type="text"/>	<b>Position:</b> <input type="text"/>	<b>%:</b> <input type="text"/>	
<b>Name / Holdco:</b> <input type="text"/>	<b>DOB:</b> <input type="text"/>	<b>Since:</b> <input type="text"/>	
<b>Home Address:</b> <input type="text"/>	<b>Position:</b> <input type="text"/>	<b>%:</b> <input type="text"/>	
<b>Name / Holdco:</b> <input type="text"/>	<b>DOB:</b> <input type="text"/>	<b>Since:</b> <input type="text"/>	
<b>Home Address:</b> <input type="text"/>	<b>Position:</b> <input type="text"/>	<b>%:</b> <input type="text"/>	
<b>Name / Holdco:</b> <input type="text"/>	<b>DOB:</b> <input type="text"/>	<b>Since:</b> <input type="text"/>	
<b>Home Address:</b> <input type="text"/>	<b>Position:</b> <input type="text"/>	<b>%:</b> <input type="text"/>	

### 2. Key Personnel (Engineers, Estimators, Project Managers, etc.)

Name	Position	Hiring Date

3. Has the company, any prior company or any of the owners or their spouses or a company owned by any of them ever been placed in receivership or bankruptcy? If yes, please provide details.	<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>
4. Has the company, its owners or any of the related companies provided any guarantees for the indebtedness of any other party, outside Corporation or individuals? If yes, please provide details.	<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>
5. Does the company have one or more related companies? If yes, list them here and attach financial statements.	<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>

Name	Nature of Operations

6. Type of Contractor, e.g. General Building Contractor, Paving, Electrical, etc. (If more than one type, list all and give approximate percentage of annual sales applicable to each.)

7. Have there been any changes in the control, ownership, or management of the company in the past 3 years or are any such changes impending? If yes, please explain fully.	<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>
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8. State type of owner for whom you do work and list approximate percentage of your annual sales for each:

<b>Government</b> <input type="text"/>	<b>Utilities</b> <input type="text"/>	<b>General Contractors</b> <input type="text"/>	<b>Private Residential</b> <input type="text"/>
<b>Institutions</b> <input type="text"/>	<b>Private Companies</b> <input type="text"/>	<b>Developers</b> <input type="text"/>	<b>Others</b> <input type="text"/>

9. For each type of construction you do, list the 4 largest Fixed-Price Contracts you have completed.

	Contract 1	Contract 2	Contract 3	Contract 4
Contract Price	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Work	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Location	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Owner/General	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gross Profit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
% Complete	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date Completed	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surety	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 10. In what geographic area do you work? Do you ever work outside of it? **Yes:**  **No:** 

 11. Union? Non union? Do you pay Union scale wages? **Yes:**  **No:** 
**Duration of contract:**  **When does contract expire:** 

12. What was the largest amount of work on hand at any one time in the past 4 years?

 \$  **Year:**  **It consisted of** 

 13. What percentage of your work is usually sublet to others?  %

 Types of work undertaken with own forces: 

 Types of work usually sublet: 

 Do you obtain bonds from your subcontractors? 

14. List your present 4 largest suppliers:

Name of Company	Mailing Address	Email	Phone #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 15. Name of present or most recent surety: 

 Limits established: (a) Total work on hand: \$  (b) Single job: \$ 

 Reason for changing surety: 

 Have you ever been refused a bond? Yes:  No: 

 If yes, why: 

 16. Name of accounting firm: 

 Contact person:  Phone #: 

 17. At what intervals are interim statements prepared?  Monthly  Quarterly  Semi-annually  Annually

 18. Name of bank:  Address: 

 Acct Mgr.:  Phone:  With bank since: 

 Authorized line of credit:  How much presently used? 

 19. Are there any liens for labour or material filed against you by anyone? If yes, state the amounts and details. **Yes:**  **No:** 

 20. Are there any judgments, suits or claims outstanding against your company, its officers or any company of either? If yes, explain on separate page. **Yes:**  **No:** 

 21. Are others disputing any work which you did or failed to do or any account which you presented to them? If yes, explain on separate page. **Yes:**  **No:** 

 22. Are there any liens for labour or material filed by you against a third party? If yes, explain on separate page. **Yes:**  **No:** 

 23. Is the company presently engaged in any dispute with suppliers or sub trades relative to their work or materials? If yes, explain on separate page. **Yes:**  **No:** 

 24. Is there a formal Buy/Sell agreement? If so, please attach a copy. **Yes:**  **No:**

25. Is there Key Man life insurance?

<b>Yes:</b>	<input type="text"/>	<b>No:</b>	<input type="text"/>
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Key Person	Amount	Beneficiary
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**26. List of insurance coverage in effect:**

Coverage	Yes	No	Limits	Ins Co	Coverage	Yes	No	Limits	Ins Co
Liability	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Fidelity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Environmental	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Errors & Omissions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>					

27. What is the maximum size contracts in each type of work you do, do you think your company is best qualified to handle?

<b>Type:</b>	<input type="text"/>	<b>Type:</b>	<input type="text"/>	<b>Type:</b>	<input type="text"/>
<b>Amount:</b>	<input type="text"/>	<b>Amount:</b>	<input type="text"/>	<b>Amount:</b>	<input type="text"/>

28. What work program do you feel your organization is qualified to undertake?

Total program any one time:	<input type="text"/>	During the next 12 months:	<input type="text"/>
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**29. Attached to this presentation should be:**

- Last three fiscal year end statements and any recent interim statement of the applicant and of all related companies
- Personal financial statements of all shareholders and financial statements of their other companies whether active or not
- Purpose and description of operations of each of the related or privately owned companies whether active or not
- Current Uncompleted Work Schedule and Uncompleted Work Schedule as of latest financial year end
- A copy of the complete Line of Credit Loan Agreement with your bank

**“NOTICE AND ACKNOWLEDGEMENT”**

The Undersigned, on behalf of the Company, acknowledges that any personal information provided by it in connection with this application has been collected in accordance with the Personal Information Protection and Electronic Documents Act (Canada) and any other applicable privacy legislation, and that this information shall only be used or shared by Roughley Insurance Brokers Ltd. to assess, underwrite and price surety products and related services, administer and service surety products, evaluate and investigate claims, detect and prevent fraud, analyze and audit business results and/or comply with regulatory or legal requirements.

The Undersigned also declares that if it submits personal information on any other persons in connection with this Questionnaire, it has obtained consent from such persons to the collection, use and disclosure by Roughley Insurance Brokers Ltd. for the above purposes.

The Undersigned hereby represents that the above statements are true and authorizes the bank and the other references to verify the correctness of the statements.

<b>Prepared for the company by:</b>	<input type="text"/>	<b>Position:</b>	<input type="text"/>
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<b>Signature:</b>	<input type="text"/>	<b>Date:</b>	<input type="text"/>
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**BROKER USE ONLY**

Account Handler:	<input type="text"/>	Date Received:	<input type="text"/>	Reference #:	<input type="text"/>
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