



Subcontractor Registration Form

Company Name:

Phone Number:

Fax Number:

Address:

FEIN #:

Contact Name:

Contact email

Contact Cell:

SUBCONTRACTOR INSURANCE REQUIREMENTS

Furnish certificates of insurance in triplicate form with the project name and number stated on the certificates, and submitted prior to the beginning of on-site operations. The coverage and amounts below are minimum requirements and do not establish limits to the contractor's liability. Other coverage and higher limits may be provided at the contractor's option and expense. STATUTORY WORKERS' COMPENSATION, Employer's Liability, not less than \$100,000.00



2. COMPREHENSIVE GENERAL LIABILITY with extended coverage for explosion, collapse and underground hazards (XCU), Contractual, Products, Contractors Protective, (or independent Contractor), Completed Operations, Personal Injury, Broad Form Property Damage, and the Additional Interest of Employees.

LIMITS OF LIABILITY

\$1,000,000.00 EA. OCCURRENCE

\$2,000,000.00 AGGREGATE

PERSONAL INJURY LIMITS \$1,000,000.00

PRODUCTS/COMPLETED OPERATIONS \$2,000,000.00

3. AUTOMOBILE LIABILITY, including owned, non-owned and hired automobiles. Automobiles of Subcontractors and material suppliers must have this same protection, if no owned autos; it is necessary that you carry non-owned and/or hired vehicle liability as below.

LIMITS OF LIABILITY

\$100,000.00 EA. PERSON

\$500,000.00 EA. ACCIDENT

\$100,000.00 PROPERTY DAMAGE OR \$300,000.00 CSL

4. EXCESS UMBRELLA LIABILITY (at Contractor's option based on size of project)

\$1,000,000.00 EA. OCCURRENCE

\$1,000,000.00 AGGREGATE

The subcontractor shall be responsible for and maintain insurance coverage at his/**her** option and expense, to cover installation of materials, tools, equipment, etc., owned or rented.

Insurance policies are to be written by companies authorized to do business under the laws of the state in which the work is to be performed and carry an A.M. Best Rating of "A" or better.

All certificates are to contain substantially the following statement: "The insurance covered by this certificate shall not be cancelled, nor materially altered, except after thirty (30) days written notice has been received by SDF Contracting, LLC. by Certified Mail."

All certificates are to name SDF Contracting, LLC. as an Additional Insured, but only with respect to liability arising out of "your work". THIS IS MANDATORY.

Contact Us

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