



Penn-America Group, Inc. Roofers Supplemental Application

Applicant Name _____

Applicant Address _____

City _____ State _____ Zip Code _____

Type of Roofing %:

Residential _____% Commercial _____% Industrial _____%

Tract homes _____% Town homes _____% Condos _____%

Number of stories _____ Years in Business _____

Prior Carrier and loss information:

<u>Carrier</u>	<u>Year</u>	<u>Premium</u>	<u>Losses- (Describe)</u>

Payroll _____ Sales _____ Subcontracted cost _____

Roofing process percentage:

Shingle _____% Hot tar _____% Torch work _____% Other _____%

Is any work subcontracted out? _____ If so, what percentage _____%

Are certificates secured from subs with equal limits? _____

If not, what limits do they carry? _____

Is any casual labor used? _____ If so, what percentage _____%

List three largest jobs worked on over the last year:

The undersigned is an authorized representative of the applicant and certifies that reasonable inquiry has been made to obtain the answers to questions on this application. He/she certifies that the answers are true, correct and complete to the best of his/her knowledge.

Applicant Signature _____ Date _____

Producer's Signature _____ Date _____