

Snow Removal Questionnaire

Named Insured : _____ Policy # : _____

1. Does your snow removal operations include sanding or salting? YES NO
If not, is there another contractor designated to do the sanding and salting? YES NO

2. What triggers your response for removing snow?

- Direct request from Customer: _____
- Prearranged amount of Snowfall: _____
- Other ? _____

3. Do you do any snow removal of highways, roads, streets, airport or concessions road? YES NO

4. Do you have a contract with your clients? YES NO If yes, please provide a copy

5. What is your Snow removal total income including salting and sanding? _____

6. What Percentage of work is made for Residential? _____

7. What Percentage of work is made for Commercial? _____
Provide a list of Commercial Customer(s)

8. Percentage of work:

Parking lots _____% Driveways _____% Sidewalks _____% Streets _____%
Roads _____% Highways _____% others _____% Describe: _____

9. Do you keep written records regarding of the following: (Attach blank copy)

Snow Removal Operations? YES NO
Salting and Sanding Operations? YES NO

10. List and describe your Liability losses with regards to snow removal operations in the last 5 years:

11. What type of equipment and how many are used for your Snow Removal?

Backhoe _____ Pick-up with plow _____ Front end loader _____ Other, describe: _____

12. Who is your Commercial Automobile Carrier? _____

Does your automobile policy include coverage for attached machinery? YES NO

13. Do you and your clients perform a pre-season and post-season survey to agree on the condition of the grounds/worksites (building, equipment, landscaping, etc.)? YES NO

Signature of Insured: _____ Date: _____ Printed name: _____