BUSINESS INSURERS OF GEORGIA

Prospect Notification Form Questions

All submission should be submitted via our Client Portal.

A list of questions is provided below for reference only.

Overview

Proposed Effective Date _____

What is the effective date needed for this requested coverage?

Prospect Company Name _____

Prospect Company FEIN _____

Prospect Company Website _____

Prospect Company Mailing Address _____

_____

Detailed Description of Prospective Client's Business (not job-specific duties)

_____

_____

_____

_____

Is this prospect notification for BID purposes only? Y / N

If this prospect notification is for BID purposes only, do you need a BID Certificate of Insurance? Y / N

Are any employees being placed here because of a relationship with a vendor? Y / N

If yes, please provide the vendor's name and address.

_____

_____

_____

Does this prospect require a Waiver of Subrogation? Y / N

Does this prospect require an Alternate Employer Endorsement? Y / N

If this PN requires an endorsement, please provide the endorsement requirements or upload a sample document.

_____

_____

Does this PN in any way involve the production or sale of cannabis-based products? Y / N

If so, please complete and upload the Cannabis Supplemental Form.

Staffing Employee Info

This page may be replicated to accommodate multiple types of staffing endorsement requests.

Will your employees perform their work at a **different** address than the Prospect Mailing address? Y / N

If yes, please provide the worksite address.

_____

_____

If yes, which address should be used in the Certificate Holder box on the Certificate of Insurance?

Prospect Company Address / Worksite Address

Which state will the workers be placed? _____

Provide the state's class code, if known. _____

If state is HI, ME, MN, NJ, or RI, please provide your UAIN/State ID #, if known. _____

Number of Employees _____

Detailed Description of Job Duties _____

_____

_____

_____

Estimated Annual Payroll _____

Training & Safety

What training does the staffing company provide?

_____

_____

What training does the prospect company provide?

_____

_____

Is PPE required for any of the job duties? Y / N
If PPE is required:

What PPE is required for each job description?

_____

_____

Who will furnish PPE and do appropriate PPE training?

_____

_____

Will PPE be enforced for all workers, and is a written discipline policy in place?

_____

_____

Exposure & Risk Assessment

Has temp placement company visited the worksite? Y / N

If yes, please provide details about the work site visit.

_____

_____

Did you complete an OSHA Establishment Search for this prospect? Y / N

If yes, explain the OSAH Establishment Search results.

_____

_____

Will there be any group travel or company transportation exposures? Y / N

If yes, how many employees will be in a vehicle at a given time, what type of vehicle is being used, and how many miles will be driven each way?

_____

_____

Are there any trenching/excavation exposures? Y / N

If yes, what is the maximum width and depth of the trenching/excavation exposure?

_____

_____

Is there any height exposure above ground level? Y / N

If yes, what is the maximum height exposure above ground level and what methods are used to elevate the employee above ground level?

_____

_____

Are there any chemical exposures? Y / N

If yes, describe the type of chemicals and exposure to them.
Upload Material Safety Data Sheets, when available.

_____

_____

Is there any machinery or equipment exposure? Y / N

If yes, please describe the type or machinery or equipment.

_____

_____

Do any operations require respirators or dust masks? Y / N

If yes, describe the operations that require respirators or dust masks.

_____

_____

Are there any airborne and/or bloodborne pathogens exposures? Y / N

If yes, describe the airborne and/or bloodborne pathogens exposures.

_____

_____