

#### US - ENVIRONMENTAL

#### **ATTACHMENTS**

Please submit the following with your application as applicable:

- Sample project contracts with owners (if the Applicant is a general contractor), general contractors (if the Applicant is a specialty, trade or sub-contractor), and subcontractors.
- Past five years currently valued loss runs for Professional, Pollution and General Liability.
- Loss information for professional or pollution claims or incidents at project locations/job sites within the past 5 years.
- Most recent two years audited financials, including income statement and balance sheet.

<b>Proposed Effective Dat</b>	e: asap			
Requested Coverage:	Requested Lin	nits:	equested Retention:	
☐ Contractor's Polluti	on a)	a	)	_
☐ Insured's Locations			)	_
☑ Professional Liabili	c) 1000000	c)	5000	_
☐ Protective Profession	nal d)		)	
	sted for the Applicant's lo onal location details may	ocations, a Site Environment be required.	al Impairment Liabilit	y Supplemental
	PART	I - APPLICANT		
Applicant Name: Distinctive	Glass, Inc			
Mailing Address: 6333 212th	St SW, Ste E			
City: Lynnwood		State: WA	Zip:_	98036
Contact Name: Kari Bergstron	m	Contact Title: Finance	Manager	
Telephone: 206-510-2023		Email: kari@distinctiv	veglass.com	
Website: www.distinctiveglas	ss.com			
Company is a:	ration □Partnership <b>[</b>	□Joint Venture □Other (s	pecify):	
	Field Personnel: 9	Other Technical or Professi	onal (describe): 10 office	
Please provide the following	information for all subsi	diaries <u>for which coverage</u>	is desired.	
Name of Subsidiary	Location	Nature of Business	Applicant's % of Ownership	Revenues
			%	
			%	

Please provide the following information for all additional entities for which coverage is desired.

Name of Entity	Location	Nature of Business/ Services Provided	Relationship to Applicant	Revenues

## PART II - COVERAGE

#### Previous Contractors Professional and Pollution Liability Coverage:

☑ No prior Contractors Professional and Pollution Liability coverage (if selected, proceed to Requested coverage)

Effective Date /Term	Carrier	Limits	SIR	Retro Date	Premium

The existing CPL coverage is:    Occurrence    Claims-Made – Retroactive Date:	
--	--

## **Current GL policy:**

Effective Date /Term	Carrier	Limits	Deductible
	NIP	1000000	

### PART III - COMPANY AND OPERATIONS

- 1. Description of Professional Services: Communicate with customers on design and specifications of glass products
- 2. Description of Contracting Operations: Measure, Furnish, &/or Installation of mirrors, shower doors, glass railings,
- 3. Geographical breakdown of business by state for most recent fiscal period:

State	% of work		0		
wa	100				

4.	Does the	Insured per	form any wor	k outside	the U.S?	∐Yes ⊌No	)
----	----------	-------------	--------------	-----------	----------	----------	---

٥.	if yes, list countries and associated revenue and work performed in each country.	

CPPL 5/20 Page 2 of 10

6. Please provide total revenues for each of the past three fiscal years and projected revenue:

Fiscal Year End (Month/Year)	<b>Gross Revenues</b>
Current Year: 12 / 2021	\$4,576,652
First Year Prior: <u>12</u> / 20 <u>20</u>	\$ <u>4</u> ,339,540
2 <sup>nd</sup> Year Prior: 12 / 20 19	\$ 4,379,812

Total projected gross revenue for the next 12-month period:

\$5,000,000

7. Revenue data / Project Delivery Info:

	Current Year Construction Revenues	Current Year Professional Fees	Most recent 12 months Construction Revenues	Most recent 12 Months Professional Fees
General Contracting Only	\$ 0	N/A	\$0	N/A
Construction Management – At-Risk	\$ 0	\$ 0	\$ 0	\$0
Construction Management – Agency	\$0	\$ 0	\$ 0	\$0
Design/Build with In- House Design	\$ 0	\$ 0	\$0	\$0
Design/Build with Subcontracted Design	\$	\$	\$	\$
Design only for Third Parties	\$ 0	\$ 0	\$ 0	\$0
Development or Project Management::	\$0	\$ 0	\$ 0	\$ 0
Other Technical or Professional Service Fees (describe):	\$ 0	\$ 0	\$ 0	\$ 0
Other (describe):	\$	\$	\$	\$

a)	Describe the types of projects including construction value and clients where in-house design is performed:
	n/a
b)	Do you provide value engineering and constructability reviews?
	no

8. For the most recent12 month gross revenue amount, please allocate the contracting services/work according to the categories shown below. In the "Subcontracted" column, please indicate what percentage, if any, of that category is performed by subcontractors.

ENVIRONMENTAL PROFESSIONAL SERVICES									
	% of Revenue	Sub- contracted Amount		% of Revenue	Sub- contracted Amount				
Air/Soil/Groundwater Consulting	0 %	0 %	Health & Safety Training or Consulting	0 %	0 %				
Asbestos or Lead Abatement design or consulting (non-residential)	0 %	0 %	Laboratory Services	0%	0 %				

Asbestos or Lead Abatement design or consulting (residential)	0 %	0 %	Landfill Design	0 %	0 %
Construction or Project Management (supervision of Environmental operations)	0 %	0%	Master Planning & Sustainable Development	0%	0 %
Ecological Services	0 %	0 %	Modeling	0%	0 %
Environmental Consulting	0 %	0 %	Mold Consulting	0 %	0 %
Environmental Engineering	0 %	0 %	Natural Resource Planning	0 %	0 %
Environmental Phase I site assessments	0 %	0 %	Permitting and/or Regulatory Consulting or Compliance	0 %	0 %
Environmental Phase II site assessments	0 %	0 %	Remedial Design	0 %	0 %
Geotechnical	0 %	0 %	Resource and Waste	0 %	0 %
NON-EN	VIRONM	ENTAL PI	ROFESSIONAL SERVICES		
	% of Revenue	Sub- contracted Amount		% of Revenue	Sub- contracted Amount
Architecture	0 %	0 %	Land Use Planning	0%	0 %
Civil Engineering	0 %	0 %	Landscape Architecture	0 %	0 %
Communication Engineering	0 %	0 %	Marine Surveyors	0 %	0 %
Construction Management – Agency	0 %	0%	Mechanical Engineering	0 %	0 %
Construction Management – At-risk	0%	0%	Mining/Well Engineering	0 %	0 %
	J				0.0/
Construction Material Testing	0 %	0%	Naval/Marine Engineering	0 %	0 %
Construction Material Testing  Electrical Engineering	0 %	0%	Naval/Marine Engineering  Process Engineering	0%	
					0%
Electrical Engineering	0%	0 %	Process Engineering	0%	0 %
Electrical Engineering Fire Protection Engineering	0%	0 %	Process Engineering Product Design	0%	0 %
Electrical Engineering Fire Protection Engineering HVAC/Mechanical Engineering	0%	0%	Process Engineering Product Design Safety Consulting	0%	0%
Electrical Engineering Fire Protection Engineering HVAC/Mechanical Engineering Interior Design	0 % 0 % 0 %	0 % 0 % 0 %	Process Engineering Product Design Safety Consulting Soils/Geotechnical Engineering	0%	0 %

ENVIRONMENTAL OPERATIONS & SERVICES					
	% of Revenue	Sub- contracted Amount		% of Revenue	Sub- contracted Amount
Air/Soil/Groundwater Sampling	0 %	0 %	Liner Construction or Installation	0 %	0 %
Asbestos or Lead Abatement (non-residential)	0 %	0 %	Marine Related Work	0 %	0 %
Asbestos or Lead Abatement (residential)	0 %	0 %	Mold Abatement	0 %	0%
AST Installation, Service, Removal or Closure	0 %	0%	Soil / Groundwater Remediation	0 %	0 %
Bioremediation	0 %	0 %	Soil / Groundwater Sampling	0 %	0%

CPPL 5/20 Page 4 of 10

Dredging (for remediation purposes)	0 %	0 %	Subsurface	e Remediation	0 %	0 %
Drilling (soil or groundwater samples or Monitoring Wells)	0 %	0 %	Tank Clear	ning	0 %	0%
Emergency Response Cleanup / Remediation	0 %	0 %	others, asso	ation of materials for sociated with ental operations	0 %	0 %
Industrial Cleaning	0 %	0 %	UST Instal Removal o	llation, Service, or Closure	0%	0 %
Landfill Construction or Closure	0 %	0 %				
Other Environmental operations (descri	be operations/	services):			0 %	0 %
NON-EN	VIRONM	ENTAL O	PERATIO	ONS & SERVICES		
	% of Revenue	Sub- contracted Amount	2		% of Revenue	Sub- contracted Amount
Builder or Developer (non-residential)	0 %	0%	Industrial (	Cleaning	0%	0 %
Builder or Developer (residential)	0 %	0 %	Insulation		0 %	0 %
Carpentry	0 %	0 %	Janitorial /	Cleaning	0 %	0 %
Construction Management (supervision of Non-Environmental operations)	0 %	0 %	Landscapin	ng	0 %	0 %
Demolition or Dismantling	0 %	0%	Masonry /	Concrete	0%	0 %
Dredging	0 %	0%	Painting		0 %	0 %
Drilling (oil, gas or water wells)	0%	0 %	Parking Ser	ervices	0 %	0 %
Drywall	0 %	0 %	Pesticide/H application	Herbicide/Fertilizer n	0%	0 %
Electrical	0 %	0%	Plumbing		0 %	0 %
Elevator Service	0 %	0 %		Management for others urrent schedule of	0 %	0 %
Excavation / Grading	0 %	0%	Roofing		0%	0%
Fire/Water Restoration	0 %	0 %	Security Se	ervices	0 %	0%
General Contractor (commercial/non-residential)	0 %	0%		Labor sub-contractor operations/services):	0 %	0 %
General Contractor (industrial)	0 %	0 %	Steel Erect	tors	0 %	0%
General Contractor (residential)	0 %	0 %	Street / Roa Construction	oad / Bridge / Railroad on	0 %	0%
Homebuilder	0 %	0 %	others, asso	nation of materials for sociated with non- ental operations	0%	0%
HVAC / Mechanical	0 %	0 %	Industrial C		0 %	0 %
Other operations (describe operations/se Glass - mirrors, shower doors, interior g					100 %	0 %
TOTAL OPERATION	S AND SE	RVICES			100 %	%
TOTAL REVENUES (%'s	should add	d up to 100	%)		100 %	%

CPPL 5/20 Page 5 of 10

9. Please indicate the types of clients/facilities at which the Applicant's operations and services are performed.

Airport	0 %	Industrial Waste Treatment	0 %	Power Plants	0%
Amusement Rides	0%	Hotels/Motels	%	Roads/Highways	0%
Apartments	2.5 %	Landfills	0%	Schools/Colleges	0%
Arenas/Stadiums	0%	Libraries	0 %	Sewage/Water Systems	0%
Bridges	0 %	Manufacturing/Industrial	0 %	Sewage/Water Treatment	0%
Churches/Religious	0 %	Mass Transit	0%	Shopping Centers/Retail	0 %
Condos/Townhomes	5 %	Multi-Family/HUD	0 %	Superfund/Pollution	0 %
Convention Centers	0 %	Municipal Buildings	0%	Tract Homes	5 %
Courts/Jails/Justice	0 %	Nuclear/Atomic	0%	Tunnels	0%
Custom Residential	80 %	Office Buildings	2.5 %	Utilities	0 %
Dams	0%	Parking Structures	0 %	Warehouses	0%
Harbors/Piers/Ports	0 %	Parks/Playgrounds/Pools	0 %	Waste Water Treatment Plants	0 %
Hospital/Healthcare	0 %	Pipeline/Petro/Chemical	0 %	Water Systems:	0%
Other(specify): 0	%	Residential Subdivisions	10 %	TOTAL	100%

# 10. Client Types:

Commercial 5 %		Educational/Institutional	%	State Govt	%
Contractors	50 %	Lending Institutions	%	Local Govt	%
Design Professionals	10 %	Industrial	%	Environmental Consultants	%
Developers	%	Federal Govt	%	Other Home Owner's	35 %

## 11. Project Size by construction value:

\$0-\$5,000,000	5000.00	\$25M-\$50M	
\$5M-\$10M		\$50M-100M	
\$10M-\$25M		>\$100M	

12. Does the applicant perform work on projects that employ any LEED or Green Building Materials or Technologies
energy efficiency use or certification? □ Yes □ No

onergy emercinely and of continuation. In 166 In 166	
If Yes please explain:	
13. Does the applicant perform work on projects that employ a BIM or similar system ? ☐ Yes ☐ No If Yes please explain:	
14. Regarding the applicant's three largest projects in the past three years, please provide the following:	
1) Project Description: Krekow - MT20	
Scope of Work: Measure, Furnish, Install - shower doors, mirrors, and misc interior glass	
Revenue Size: \$96.169	

CPPL 5/20 Page 6 of 10

	2)	Project Description: Toth - Roanoke	
		Scope of Work: Measure, furnish, & installation of shower doors, mirror, and other interior	glass
		Revenue Size: \$104,075	
	3)	Project Description: Arion Investment	
		Scope of Work: Measure, furnish, & installation of shower doors and mirrors	
		Revenue Size: _\$49,410	
		PART IV – RISK MANAGEMENT AND PROCEDURES	
1.	Does	the Applicant have the following written procedures or employ protocols for:	
			□Yes □No 回N/A
	Pr	eventing spills or releases of liquids, chemicals and/or hazardous materials?	□Yes □No 回N/A
	A	voiding underground hazards?	□Yes □No □N/A
	Q	uality Assurance (QA)/ Quality Control (QC)	□Yes □No 回N/A
2.	What	% of the Applicant's work for clients is performed under written contract?	50%
	Wh	o has authority to review and negotiate client and/or subcontract agreements?	Brian Bergstrom, Dennis Vogt, Andy Bergstrom, Kari Ber
	Wh	to has authority to review and/or approve non-standard contract language in contracts?	See Above
	Are	e written formal change order provisions utilized?	☑Yes □No □N/A
	Do	es your firm use Limitation of Liability provisions in their contracts?	□Yes □No □N/A
		What %?%	
3.	What %	6 of the time are subconsultants/subcontractors hired under written contract?	0
	Do	es any Insured ever subcontract design services?	□Yes □No
	If y	res, is professional liability required?	□Yes □No □N/A
	Ple	ase list limits required:	
	Are	e certs of insurance obtained and kept on file?	□Yes □No 回N/A
		PART V – CLAIM HISTORY	
1.		he Applicant's Professional or Pollution Liability coverage ever been cancelled or non s \(\simegn N\) o \(\simegn N/A\) If Yes, please describe:	
2.	In the a vio a rep	e last five years, has the Applicant been or does the Applicant anticipate being named, a lation of any standard or law relating to the release or threatened release of a Pollutant rimand, or a disciplinary or criminal action by any federal, state or local authority, profilicensing board?   Yes  No	cited, or prosecuted for t or been the subject of
	I	f Yes, please describe:	
3.		e describe any claim, suit, notice, or legal action made against the Applicant, including ast or present Principal, partner, offer or director or any other prospective Insured part	
	a	. Date of Claim:	

CPPL 5/20

	b. Allegations:
	c. Open claims - Insurance company reserves:
	d. Closed claims - total loss payment (indemnity plus defense costs):
	e. Defense attorney or insurance company's evaluation of claim:
4.	At the time of signing this application, does the Applicant know of any facts or circumstances, project problem or delay which may reasonably be expected to result in a claim under this policy?               Yes     No
	If Yes, please explain:

5. Has any claim ever been filed by the applicant or other proposed Insured against a design professional? □Yes □No

#### **FRAUD WARNINGS**

NOTICE TO ALABAMA, ALASKA, ARIZONA, ARKANSAS, CONNECTICUT, DELAWARE, GEORGIA, IDAHO, ILLINOIS, INDIANA, IOWA, KANSAS, MARYLAND, MASSACHUSETTS, MICHIGAN, MINNESOTA, MISSISSIPPI, MISSOURI, MONTANA, NEBRASKA, NEVADA, NEW HAMPSHIRE, NORTH CAROLINA, NORTH DAKOTA, OREGON, RHODE ISLAND, SOUTH CAROLINA, SOUTH DAKOTA, UTAH, VERMONT, WASHINGTON, WEST VIRGINIA, WISCONSIN, AND WYOMING APPLICANTS: In some states, any person who knowingly, and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or, for the purpose of misleading, conceals information concerning any fact material thereto, may commit a fraudulent insurance act which is a crime in many states.

**NOTICE TO CALIFORNIA APPLICANTS:** In some states, any person who knowingly, and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or, for the purpose of misleading, conceals information concerning any fact material thereto, may commit a fraudulent insurance act which is a crime in many states.

**NOTICE TO COLORADO APPLICANTS:** It is unlawful to knowingly provide false, incomplete or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete or misleading facts or information to a policy holder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claiming with regard to a settlement or award payable for insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

**NOTICE TO DISTRICT OF COLUMBIA APPLICANTS:** WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

**NOTICE TO FLORIDA APPLICANTS:** Any person who knowingly and with intent to injure, defraud or deceive any insurance company files a statement of claim containing any false, incomplete or misleading information is guilty of a felony of the third degree.

**NOTICE TO HAWAII APPLICANTS:** For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment, or both.

**NOTICE TO KENTUCKY APPLICANTS:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

CPPL 5/20 Page 8 of 10

**NOTICE TO LOUISIANNA APPLICANTS:** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**NOTICE TO MAINE APPLICANTS:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines, or denial of insurance benefits.

**NOTICE TO NEW JERSEY APPLICANTS:** Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**NOTICE TO NEW MEXICO APPLICANTS:** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

**NOTICE TO NEW YORK APPLICANTS:** Any person who knowingly and with intent to defraud an insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed \$5,000 and the stated value of the claim for each such violation.

**NOTICE TO OHIO APPLICANTS:** Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

**NOTICE TO OKLAHOMA APPLICANTS: WARNING:** Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

**NOTICE TO PENNSYLVANIA APPLICANTS:** Any person who knowingly and with intent to defraud any insurance company, or other person, files an application for insurance or statement of a claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties.

**NOTICE TO TENNESSEE APPLICANTS:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

**NOTICE TO TEXAS APPLICANTS:** In some states, any person who knowingly, and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or, for the purpose of misleading, conceals information concerning any fact material thereto, may commit a fraudulent insurance act which is a crime in many states.

**NOTICE TO VIRGINIA APPLICANTS:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Information or data contained in or submitted in connection with this application or in connection with the underwriting process does not constitute notice under any policy of insurance and does not satisfy any of the reporting notification or other provisions of any policy. All such notices must be given separately in accordance with the applicable policy terms and conditions.

Should the signatory become aware of any change or omission relative to the information provided herein subsequent to the completion of this application and precedent to the effecting of insurance, the undersigned promissorily warrants that he will submit to Sompo International supplementary advice specifying such change or omission.

CPPL 5/20 Page 9 of 10

Notwithstanding the immediate foregoing, however, the signatory further promissorily warrants that he will inform Sompo International of any change or omission with respect to the answers given in this application at any time subsequent to the completion thereof, provided insurance has been effected. It is agreed that the duty imposed upon the signatory by virtue of the foregoing promissory warranties, shall be nondelegable. It is further agreed that this application shall be the basis of any insurance as may be subsequently effected by Sompo International and that Sompo International will rely upon the veracity of all responses thereto in causing such insurance to be effected.

It is understood that the limit of liability under any policy to be issued in reliance hereto shall include both indemnity payments for claims and payment of claim and defense expenses as indicated in the policy.

Please note that only duly appointed agents of Sompo International and licensed brokers are authorized to solicit applications for insurance. Agents and brokers are not authorized to bind insurance. It is finally agreed that the completion of this application neither obligates the Applicant to purchase insurance nor binds Sompo International to effect insurance.

Man Plangthom	President	3/9/2022
Signed	Title	Date
то	BE COMPLETED BY INSURANCE AG	ENT
Agent's Name:		
Address:		
Phone:	Fax:	
Do you hold a surplus lines license?	□Yes □No	
If vos License Number	Expiration Data:	