



## C&S SPECIALTY UNDERWRITERS, LLC

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### CONTRACTOR'S SUPPLEMENTAL APPLICATION

This application is NOT an insurance policy and the insurance company affording coverage reserves the right to reject any application for any reason. If additional space is needed, attach details on a separate sheet of paper. All Applicants must sign the application where indicated.

#### SECTION I – GENERAL INFORMATION

Applicant name: Jean C Staudigl dba Midway Restoration Mold Contractors

Address: 11103 LEGUME CT

City: Cypress

State: TX

Zip: 77433

Phone: 754-281-7040

Ext:

Email: JC@MIDWAYSTAFF.COM

Years under current management: new venture

Years of experience: 5

States in which applicant will do or has done business: Texas only

Contractor's license number: MRC1346

Is applicant member of a union?

☐ Yes ☒ No

Describe all operations: mold remediation

Does applicant currently own or operate any other business

☐ Yes ☒ No

If "Yes", list name and describe operations and percentage of ownership:

List and describe operations of all other business names and licenses, active or inactive, applicant has used in the last Five (5) years:

n/a

Has applicant filed bankruptcy in the past five (5) years?

☐ Yes ☒ No

If "Yes", please describe:

Provide financial information for the last five (5) years and estimates for the next year:

Year	Direct payroll	# of employees	Subcontractor costs	Gross receipts
Next year	40,000	1	4000	120,000
Last year	0	0	0	0
2nd year prior	0	0	0	0
3rd year prior	0	0	0	0
4th year prior	0	0	0	0
5th year prior	0	0	0	0

Does applicant carry workers compensation in insurance on their employees?

☐ Yes ☒ No

#### SECTION II – BUSINESS INFORMATION

1. Is applicant or any proposed named insured a (check all that apply):

<input type="checkbox"/> Construction consultant	<input type="checkbox"/> Construction manager	<input type="checkbox"/> Developer
<input type="checkbox"/> General contractor	<input checked="" type="checkbox"/> Subcontractor	<input type="checkbox"/> Spec builder
<input type="checkbox"/> Architect/engineer	<input type="checkbox"/> Surveyor	<input type="checkbox"/> Real estate agent/broker

2. Using percentage of payroll (under direct) and percentage of contractor costs (under subbed), indicate the anticipated percentage of work you will perform over the next 12 months:

Type of work	% direct	% subbed	Type of work	% direct	% subbed	Type of work	% direct	% subbed
Airport runways	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Excavation	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Roofing	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Blasting	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Fireproofing	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Seismic retrofitting	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Bridge related	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Grading	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Sewer	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Carpentry	<input type="text" value="0"/> %	<input type="text" value="0"/> %	HVAC	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Sandblasting	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Concrete	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Insulation	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Street Cleaning	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Demolition	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Masonry	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Street/road	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Drilling	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Mechanical	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Supervisory only	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Drywall	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Painting	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Waterproofing	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Earthquake	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Plastering	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Water/gas mains	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Electrical	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Plumbing	<input type="text" value="0"/> %	<input type="text" value="0"/> %	Other (describe):	<input type="text" value="0"/> %	<input type="text" value="0"/> %

3. What percentage of work is (total should equal 100%):

Commercial  % Residential  % Public works/government  %

4. What percentage of work is (total should equal 100%):

New construction  % Remodel/repair  %

5. What percentage of work is (total should equal 100%):

Interior  % Exterior  %

6. Project summary – complete unit information for NEW residential starts only:

	New	Repair/Remodel	# units for next 12 months	# units for previous 12 months	# units for 2nd Year prior	# units for 3rd year prior
Single family	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Duplexes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Triplexes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Fourplexes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Townhomes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Condominiums	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Cooperatives	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Tract homes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Apartments	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Senior living facilities	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Other (describe): Commercial	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text" value="Unknown"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

7. What percentage of applicant's work is related to construction, reconstruction, remodeling, or repair of condominiums?  %

8. What is the percentage split between work for association vs the unit owner?

Association  % Unit Owner  %

9. Does applicant perform or has applicant performed "wrap-up" or OCIP project?

☐ Yes ☒ No

If "Yes", list name and describe operations and percentage of owner

10. Describe applicant's four (4) largest projects over the past five (5) years, including cost:

New venture

11. Describe applicant's four (4) largest projects currently underway or planned in the next twelve months, including cost:

none, applicant needs coverage to start applying for jobs

12. What is the average value of a completed project? small jobs, \$1000 Approximately

13. Is there a formal safety program in place? ☒ Yes ☐ No

14. Is there a formal warranty program in place? ☐ Yes ☒ No  
If "Yes", please describe:

15. What percentage of work is performed at: 1-3 stories  % 3-10 stories  % 10+ stories  %

16. Does applicant/has applicant performed any work below grade? ☐ Yes ☒ No  
If "Yes", advise: Maximum depth:  Percentage of operations  %

17. Does applicant/has applicant built on hillsides, slopes, landfills, or in subsidence areas? ☐ Yes ☒ No

18. Does applicant/has applicant performed shoring, underpinning, caisson or cofferdam work? ☐ Yes ☒ No

19. Does applicant own vacant land, real estate development property, or model homes? ☐ Yes ☒ No  
If "Yes", please describe:

20. Does applicant lease cranes, mobile equipment, or other machinery to others? ☐ Yes ☒ No

21. Does applicant/has applicant performed any of the following ?

Work at airports	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
LPG work greater than 5%	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Demolition of structures in excess of three (3) stories	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Repair for fire, or water damage	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Boiler inspection, install, cleaning or repair	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Removal of asbestos or other hazardous materials	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Pressure washing or sandblasting greater than 4,500 PSI	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Building structure—Raising or moving	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Is "Yes", please describe:

22. If you are a roofing contractor, subcontractor or performing roofing work, do you use.

Method			Percentage of Work (%)
Hot Tar	N/A		n/a
Torch Down	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
Modified Bitumen (hot)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
Modified Bitumen (cold)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
Hot Air Welding	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
Other: <input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	n/a

23. Does applicant/has applicant performed work under the USL&H and/or the Jones Act?

☐ Yes ☒ No

If "Yes", please describe:

24. Does applicant/has applicant allowed applicant's license to be used by another contractor?

☐ Yes ☒ No

### SECTION III – SUBCONTRACTOR INFORMATION

1. Does applicant use subcontractors in this business?

☒ Yes ☐ No

2. Does applicant require COIs from subcontractors?

☒ Yes ☐ No

3. Is applicant named as an additional insured on subcontractor's insurance policy?

☒ Yes ☐ No

4. Does applicant have a standard formal written contract in place with subcontract

☒ Yes ☐ No

5. Do all contracts with subcontractors contain a hold harmless agreement in the applicant's favor

☒ Yes ☐ No

6. How long are records of subcontractor documents noted above retained?

5 yrs

### SECTION IV – LOSS/CLAIMS HISTORY

1. Have there been any losses, claims, legal actions, or suits brought against applicant in the last five (5) years?

☐ Yes ☒ No

2. Do any of the proposed named insureds have knowledge of any pre-existing act, omission, event, condition, or damages to any person or property that may potentially give rise to any future claims or legal action against any proposed named insured?

☐ Yes ☒ No

3. Has applicant been accused of faulty construction in the past five (5) years?

☐ Yes ☒ No

4. Has applicant been accused of breaching a contract in the past five (5) years?

☐ Yes ☒ No

5. Has applicant filed a Mechanics Lien in the past five (5) years?

☐ Yes ☒ No

6. If you answered "Yes" to any question in Section IV please provide additional information:  
n/a

### FRAUD WARNING

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 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 five thousand dollars and the stated value of the claim for each such violation.

### WARRANTY STATEMENT

The undersigned authorized officer of the Applicant declares that the statements set forth herein are true. The undersigned authorized officer agrees that if the information supplied on the application changes between the date of the application and the effective date of the insurance, he/she (undersigned) will immediately notify C&S Specialty Underwriters, LLC and the insurer of such changes, and C&S Specialty Underwriters, LLC and/or the insurer may withdraw or modify any outstanding quotations and/or authorization or agreement to bind the insurance. Signing of this application does not bind the Applicant to the insurer to complete the insurance

Applicant's signature:

Date:

Applicant's name:

Jean C Staudigl

Applicant's title:

Owner

TEXAS DEPARTMENT OF LICENSING AND REGULATION

P.O. Box 12157  
Austin, Texas 78711-2157  
1-800-803-9202 (512) 463-6599  
[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

If you cut around the border of the license it will fit in  
a standard 5" x 7" frame.

NOTE: Issuance of the wallet card is in a separate mailing.

11441240-MRC1346

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*Mold Remediation Contractor*  
**LUKE CASTILLO**

License Number: MRC1346

The person named above is licensed by the Texas Department of Licensing and Regulation.

License Expires: July 20, 2026

*Courtney Armour*  
Courtney Armour  
Executive Director