



# Yancy Insurance & Financial Services

AGENT: Yancy Insurance & Financial Services  
2019 E Lamar Blvd, Suite 100  
Arlington, TX 76006  
817-277-6100 Phone  
817-261-7514 Fax

## Janitorial Program Supplemental Application (Complete in addition to General Liability Application)

Applicant's Name: \_\_\_\_\_ PROPOSED EFFECTIVE DATE:  
Mailing Address: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ 12:01 A.M. Standard Time at the address of the Applicant  
Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

1. How long have you been in business? \_\_\_\_\_ Currently:  Full-time  Part-time  
2. Mix of business: Commercial \_\_\_\_\_% Industrial \_\_\_\_\_% Residential \_\_\_\_\_%  
3. Property Damage Extension (see limit options below): \$ \_\_\_\_\_ Occurrence  
(coverage option selected, if limits are indicated) \$ \_\_\_\_\_ Aggregate

4.

Employee Data	Number	Annual Payroll
Owner(s) only		\$
Employees excl. clerical:		\$
Full Time		\$
Part Time		\$
Leased or Subcontracted	Number	Annual Cost
Leased employees		\$
Independent Contractors*		\$

\* Do independents provide you with certificates of insurance?  Yes  No

5. Indicate annual sales for each of following industries serviced:

Operations for	Annual Sales	Operations for	Annual Sales
Aircraft	\$	Offices	\$
Apartments	\$	Off-shore oil rigs	\$
Construction Make-Ready	\$	Private Residences	\$
Convenience Stores, Grocery Stores and Supermarkets	\$	Retail Stores	\$
Convention Halls	\$	Schools/Colleges/Universities	\$
Crime Scene Cleanup	\$	Shopping Centers & Malls	\$
Department Stores	\$	Sports Complexes	\$
Hospitals/Convalescent Homes	\$	Transportation Terminals	\$
Hotels	\$	Theaters	\$
Industrial	\$		\$
Other (describe)			\$
Total Annual Sales			\$

6. Type of Operations Performed: (Show sales figures for bolded operations)

Operation	Payroll/Sales	Operation	Payroll/Sales
Carpentry	\$	Painting	\$
Carpet/Upholstery Cleaning	\$	Pressure Washing	\$
Construction Cleanup <input type="checkbox"/> Interior <input type="checkbox"/> Exterior	\$	Private Residences	\$
Consulting	\$	Sandblasting	\$
Equipment Rental	\$	Security	\$
Floor Stripping/Waxing	\$	Snowplowing	\$
Janitorial – General Services	\$	Restaurant Hood Cleaning	\$
Janitorial Supply Retail/Wholesale	\$	Window/Screen/Skylight Cleaning	\$



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Landscaping/plant or shrub servicing	\$	Other (describe)	\$
Machinery/Equip. clean/degreasing	\$		\$

7. **Window cleaning:** Max. no. of stories \_\_\_\_\_ Scaffolding/rigging, if any:  Rented  Owned
8. **Please provide a brief description of any hazardous waste handled, storage of combustible material, and recyclables handled:** \_\_\_\_\_
9. **Are your employees bonded?**  Yes  No If yes, effective date of coverage: \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

### Janitorial Program Rating Work Sheet

	(A) Class Code	(B) Rate	(C) Increase In Agg. Limit Debit	(D) Fringe Cred. Mod.	(E) Cred./ Deb. Mod.	(F) 100% Res. Cleaning	Final Rate	(G) Base	Exposure	Premium
Prem. Ops.	96816		X	X	X	X	=	P)	X	=
Prem. Ops.	99303	50.00	X	X	X		=	S)	X	=
Prem. Ops.			X	X	X		=		X	=
Prod./Comp. Ops			X	X	X		=		X	=
Prem. Ops.			X	X	X		=		X	=
Prod./Comp. Ops			X	X	X		=		X	=
<b>Subcontracted Work (if applicable) – Subject to a \$50 MP</b>							<b>Subject to a \$50 MP</b>			
Prem. Ops.	91581		X	X	X		=	C)	X	=
Prod./Comp. Ops	91581		X	X	X		=	C)	X	=
<b>Flat Charge each</b>			<b>No. of add'l insds</b>							
Additional Insured	49950	\$100	X							
	<b>OR</b>	<b>Blanket Additional Insured</b>								
	49950	\$750								
<b>Property Damage Extension (GLS-55s)</b>	96816		\$5,000/\$25,000: \$75		\$50,000/\$50,000 limits: \$200					
			\$10,000/\$25,000: \$110		\$100,000/\$100,000 limits: \$250					=
			\$25,000/\$25,000: \$125		\$250,000/\$250,000 limits: \$500					
<b>Lost Key Coverage (GLS-68s)</b>			\$25,000 Limit of Liability							included

**Total Premium, subject to minimum premium (H) \$ \_\_\_\_\_**

#### INSPECTION REQUIREMENTS:

New Business Over \$2,500 premium  
Renewals Over \$5,000 premium to be ordered every three years

#### (A) Class Codes Description:

- 91581** Contractors – subcontracted work – in connection with construction, reconstruction, erection or repair – not buildings
- 96816** Janitorial Services including products and completed operations. Products/Completed Operations are subject to the General Aggregate limit.
- 99303** Snowplowing including products and completed operations. Products/Completed Operations are subject to the General Aggregate limit.

(B) **Rate:** At-limits rate from the program card.

#### (C) Increase in Aggregate Limit:

- To double the Aggregate to twice the Occurrence, up to \$1,000,000 – charge 3%
- Apply the following to the \$1,000,000/\$1,000,000/\$1,000,000 rate:
  - 1,000,000/2,000,000/2,000,000 – charge 3%
  - 1,000,000/3,000,000/3,000,000 – charge 5%
- Apply the following to the \$2,000,000/\$2,000,000/\$2,000,000 rate:
  - 2,000,000/3,000,000/3,000,000 – charge 3%

(D) **Fringe Cred. Mod.:** Multiply all credits for applicable policy exclusions to obtain the total fringe credit modifier.

CG2135 Medical Payments Exclusion	_____	0.99	
CG2137 Employees as additional insureds	_____	0.99	
CG2138 Personal Injury/Advertising Injury	_____	0.94	
<b>CG2139 Contractual Liability Limitation</b>	_____	<b>0.98 (mandatory)</b>	
CG2140 Advertising Liability	_____	0.98	
CG2145 Fire Damage	_____	0.99	
			<b>Total Fringe Credit Mod.:</b> _____

(E) A minimum 25% debit applies for insureds with 15% or more of their operations from floor stripping/waxing. (submit for approval).  
Credit program rate 5% if operations are bonded.

(F) **100% Residential Cleaning Modifier:** If operation is 100% residential, apply a 30% credit to the program rate.

(G) **Premium Basis:**