



Swimming Pool Contractors, Dealers and Installers Supplemental Application

(Complete in addition to ACORD General Liability Application)

NAME OF APPLICANT: _____

Employee Data		Number	Annual Payroll	Sales	
Owner(s) only			\$	In-ground	Above-ground
Retail:	Full-time		\$	\$	\$
	Part-time		\$	In-ground	Above-ground
Installation:	Full-time		\$	\$	\$
	Part-time		\$		
Leased or Subcontracted		Number	Annual Cost		
Leased Employees			\$		
Independent Contractors			\$		

1. Does applicant or their subcontractors use explosives? _____ Yes No
 If yes, describe: _____
2. Does applicant make a thorough study of the subsurface, including identification of existing utility pipes and lines, prior to any digging? _____ Yes No
3. If shoring is required on a job, does applicant use OSHA approved equipment and techniques? _____ Yes No
4. Does applicant have sufficient signs, barricades, and fences to keep non-employees at a safe distance from job sites and equipment? _____ Yes No
 Equipment is: owned or rented. If rented, attach a copy of the certificate of insurance from the rental company.
5. Does applicant rent portable spas? _____ Yes No
6. Does applicant manufacture or sell any products under their own label? _____ Yes No
 If yes, complete and submit Products application, GLS-APP-2.
7. Any underground tanks, petroleum products, LPG, flammable liquids, or explosives stored on premises? _____ Yes No
 If yes, type and quantity stored: _____
8. Any equipment loaned, leased or rented to others? _____ Yes No
 If yes, describe type of equipment and annual rental receipts: _____
9. Does applicant subcontract work? _____ Yes No
 If yes, describe type of work: _____
10. Are certificates of insurance obtained from subcontractors? _____ Yes No
11. Does applicant install diving boards, slides, or other accessories? _____ Yes No
 If yes, indicate estimated number of diving boards or slides installed annually for each of the following:

	Diving Boards	Slides
under 10 feet in height	_____	_____
over 10 feet in height	_____	_____

 Describe other accessories installed: _____
12. Does applicant comply with the National Spa & Pool Institute's (NSPI) minimum standards of pool installation? _____ Yes No
13. Does applicant sell products other than pool supplies? _____ Yes No
 If yes, nature of items sold: _____
14. Are all chemicals EPA approved and stored in EPA approved containers? _____ Yes No

APPLICANT'S SIGNATURE _____ DATE _____