

Texas Specialty Underwriters, Inc. 510 Turtle Cove Blvd., Suite 200

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Rockwall, Texas 75087

Voice (972) 771-5653 Fax (972) 722-5392 Watts (800) 442-7050

WELDERS SUPPLEMENTAL APPLICATION

(Complete in addition to ACORD Application)

Name of Applicant:				
1.				
2.				
		Total gross receipts:	□NO	
lf \		indicate the percentage of your operation?		
3.	Does your work include any of the following: If Yes, explain in detail in the space provided below.			
		Aircraft or Aerospace welding?	☐ NO	
	b.	Auto frame fabrication or repair? YES	☐ NO	
	C.	Balcony, stairway or handrail fabrication / installation? YES	☐ NO	
	d.	Boilers or other pressure vessels? YES	☐ NO	
	e.	Bridge building or repair?	☐ NO	
	f.	Burglar bar fabrication / installation?		
	g.	Conveyor systems? YES	☐ NO	
	h.	Feed mills or grain elevators? YES		
	i.	Hot tap welding?		
	j.	Oil field welding operations? (On or offshore) YES		
	k.	Pipeline or tank welding, if the pipeline or tank contains or has previously contained corrosive, fla or toxic fluids or gases? YES	mmable NO	
	I.	Refineries, chemical or petrochemical plant welding? YES		
	m.	Structural welding? YES	☐ NO	
4. I	^o rio	r Insurance Carrier and Policy Number:		
5.	Con	nplete claim history in detail:		
6. I	 Plea	ase use this space for additional information:		
	li .			
Δηι	olica	ant: Date:		