

**APPLICANT**

Broker: \_\_\_\_\_ Date: \_\_\_\_\_

**1. QUALIFICATIONS & EXPERIENCE: (include photocopies of all tickets)**

- (a) Certificates Held (List): \_\_\_\_\_
- (b) No. of Yrs. Experience: \_\_\_\_\_ Insured: \_\_\_\_\_ Employees: \_\_\_\_\_
- (c) Please provide copy of Safety and Fire Prevention Manual.

**2. TYPE OF WELDING DONE:**

- (a) Shop Only?  YES  NO
- (b) Off Premises?  YES  NO Percentage Involved \_\_\_\_\_ %
- (c) **OILFIELD:** Total Revenue \$ \_\_\_\_\_
  - Is Welding Strictly at Oil Site?  YES  NO
  - Is Welding Done on Rigs?  YES  NO
  - Is Welding Done on Oil & Gas Well Installations  YES  NO
  - Any Pipeline Welding?  YES  NO
  - Any "Hot" Work?  YES  NO
  - Any Welding Inside Oil Company Yards?  YES  NO
  - Any Welding Inside Gas Plants?  YES  NO
  - Any Welding Inside Refineries?  YES  NO
  - Is Welding Supervised by Oil Company Personnel?  YES  NO

**(d) GENERAL:**

What Type of welding is done? \_\_\_\_\_  
 Welding Involved with New Construction or Existing Structures? \_\_\_\_\_

- 3. Fire Precautions Taken: \_\_\_\_\_
- 4. Percentage of Work Sublet? \_\_\_\_\_ % Certificates of Insurance Obtained?  YES  NO

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Broker Name

\_\_\_\_\_  
Date

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