STANDARD SURVEY INSTRUCTIONS

PREFACE

The purpose of this guide is to consolidate the general areas of concern that need to be addressed when a survey is performed. The Standard Survey Instructions can also be used for audits to ensure a more comprehensive description of operations. Please note that while the Standard Survey Instructions are provided as a resource, Manual language is and remains controlling in terms of determining classification assignments and the Standard Survey Instructions need to be used in addition to rather than as a substitute for Manual language.

Construction:

• Describe jobs/contracts recently completed or currently underway.

Wrecking Or Demolition Or Building Moving Or Raising Project:

• Does the insured perform wrecking or demolition work? If yes, provide a description of that work.
• Note which of the following types of structures the insured will demolish:
  a) Wooden structures (including residential structures and any interior gutting)
  b) Concrete or concrete encased structures
  c) Iron or steel structures
  d) Masonry structures
  e) Piers or wharves
• Does the insured operate a secondhand material yard?
• Is the secondhand material yard operated at a permanent location, or does the insured operate temporary yards at their wrecking/demolition sites?
• Does a separate crew of employees staff the secondhand material yard?

Diagrams

Diagrams must be completed on all survey assignments (excluding construction insureds). The diagram should include all physical separations such as walls, partitions, entrances and, where applicable, counters. The diagrams can be hand drawn or drawn using the computer, however it is preferred not to submit blueprints supplied by the insured. If the insured has a large operation and a diagram would be impossible to complete, provide a narrative describing any physical separations or lack of separations in your report. With test audits, a walk-through tour of an insured’s facility is required on any test audit that involves a request to change classification (except for construction companies). Further, all but the most mundane manufacturing facilities should be toured so that the operations are clearly understood and communicated. A diagram should also be provided.

Any other operation which in your judgment warrants a tour due to the complexity of what is being described or to verify the information being submitted by a questionable informant (i.e., a bookkeeper) should also be toured. For example, it is recommended that a tour and a diagram be provided when the insured is assigned two or more classes not commonly found together or where you are recommending a second class be added due to multiple enterprise and the two operations are conducted in the same or contiguous buildings. Note the diagram is reinforcement to that part of the narrative that specifies the two operations are in physically separate work areas and also notes how the physical separation is accomplished.

In addition certain industries generally require pieces of information on each and every survey or test audit. This information can be summarized as follows:

Insured Internet Website Address

• The website address for all insureds being surveyed or test audited must be provided, if available. Simply add this information to the end of your description of operations.
Health Care Facilities and the Campus Concept:
- Certain insureds operating health care facilities such as life care facilities may have operations in two or more different contiguously located buildings and the specific health care operations conducted in each building may have a different type of state health care license. In addition to the standard Code 960 and/or Code 974 survey questions the field representative will need to develop information to enable the classification analyst to determine whether the different contiguously located facilities may be construed as a “campus” or single enterprise. See the “Definitions” Ruling & Interpretation for the DCRB/PCRB “campus” definition. In addition to the normal personnel interchange question observe whether the health care operations in the different buildings share support services including but not necessarily limited to: dietary, laundry, building maintenance or grounds maintenance. Note, each of these shared services will typically be separately staffed, but a shared service serves at least two or more differently licensed health care operations or perhaps their insured’s entire enterprise.

Informant’s E-mail Address
Ask all informants on surveys and test audits whether they have an e-mail address. If you provide the informant’s e-mail address internal staff will assume it can be used. Also be aware that subsequent communication with the insured will not necessarily occur (especially in non-letter survey situations) so provide this clarification when discussing e-mail with the informant. Place this information under the informant’s name in the survey. For test audits the email address can be added in the header section either with the website information or after the phone number of the contact.

Manufacturing:
- List and provide percentages for the raw materials (including dimension, gauges, etc., where applicable) and finished products.
- List and provide percentages for finished products.
- Do employees interchange between shop and field?
- Where applicable, provide the overall business percentages, by income, for shop versus field work.

Ownership
The following questions regarding ownership should be addressed on each survey, with the understanding that the informant may not be able to definitively answer each question. Only positive or affirmative responses need to be documented in the survey report.
1. Has the insured undergone a change in ownership within the last two to four years?
   [If the answer to Question 1 is no, skip to Question 4]
2. Prior to the specified change in ownership, did the insured operate under a different name? (The informant may not know the name of the previous owner but may know the former name of the company.)
3. As a result of the change in ownership ask the informant whether they know the percentage of the previous owner’s employees retained by the new ownership?
4. Has the insured operated under any other name in the last four years? If so, provide the name(s).
5. Is the insured currently related through common majority ownership to any other entity operating in Pa./De?

Realistically if, at the very least, the first question is asked and answered affirmatively, the Underwriting staff can investigate regarding previous owners and number of employees retained.

Service:
- Provide the overall business percentages, by income, for each type of service being provided.

Stores:
When a store sells several types of merchandise, each of which may be subject to a different classification, such store shall be classified based on the principal category of merchandise sold. The term “principal” means more than 50 percent of the business’ overall revenue.
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer (ex. to members of the general public for personal or household use versus to businesses, retailers, contractors, etc.).
• What are the business’ operating hours?
• Is any merchandise displayed for immediate sale? If the answer to this is “no,” then please advise if samples are displayed.
• Does the business display merchandise available for immediate sale in aisles that the customer may walk up and down to inspect displayed merchandise and select desired items?
• Are there baskets or shopping carts for the customers to use as they browse/select merchandise?
• In what type of area is the insured located – are there retail stores nearby, is it an industrial area (in an industrial park), a commercially zoned area that has many houses/personal houses nearby)?
• What volume of foot traffic does the outlet have for a typical business day (e.g., five, twenty-five)?
• Does the insured have a separate customer parking lot? How large is that customer parking lot?

Temporary Help:
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note - there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determine which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.
Code 005, TREE PRUNING

- Provide the overall business percentages, by income, for the various services being offered.
- Specify for which services the insured engages separate crews.
- Do the insured’s tree care operations include pruning, removal (and also stump removal), spraying and/or fumigating?
- Does the tree pruning effort include the clearing of rights-of-way for utilities?
- Regarding tree removal, note the frequency with which the insured will remove trees (daily, once a week, once a month, etc.)
- Describe any spraying or fumigating of trees being performed.
- List the equipment used in the tree trimming/pruning work.
- Provide the percentage of revenue attributable to landscaping/lawn maintenance versus tree trimming or pruning.
- If the insured is also involved in landscaping, will it perform tree pruning at the same job locations as the landscaping operations?
- Does the insured provide contract landscaping or lawn maintenance services or perform new landscaping installations? If yes, describe in detail.
- Do the lawn maintenance services further include tree trimming? If yes, carefully note in the report the frequency with which tree trimming is performed (e.g., daily, once a week) and whether the employee(s) so engaged performs this task with both feet on the ground or whether climbing a ladder or using aerial buckets is necessary. Also, note whether tree trimming is part of the overall service “package” or whether there are jobs that are principally tree trimming.
- Specify when the insured is principally engaged in applying liquid fertilizer.
- Does the insured perform reseeding and/or planting at former surface mine sites that are being reclaimed, using a separate crew?
- Note the business percentage for any snow removal work being performed.
- Does insured perform weed and/or brush spraying from trucks or by employees walking?
- If the insured grow trees, shrubs or plants either in greenhouses or in fields, note the number of greenhouses and/or acreage. Specify if the insured’s effort is principally Christmas tree growing.
- If the insured also operate a “garden center” contiguous to the nursery and/or at a separate location, give a representative listing of the merchandise, note if there is a separate/dedicated staff working exclusively in the garden center and advise of the garden center’s sales to landscaping contractors versus to homeowners.
- If the insured installs artificial turf, will the employees prepare the ground surface for the artificial turf installation or will this part be outsourced.
- Does the insured harvest Christmas trees for unrelated Christmas tree raisers?
- If the insured accepts land-clearing jobs, factor this exposure into the business percentages and carefully note the tasks the insured will perform and tasks that the insured will typically outsource.
- Does the insured clear or remove of brush using mechanical equipment such as bulldozers, hydroaxes or other similar/type equipment? What is the size of the lot or acreage cleared?

Code 007, FARM MACHINERY OPERATION

- If the insured rents farm equipment only to unrelated concerns, list and describe the equipment that is rented.
- Does the insured perform any farming, such as harvesting, hay bailing or fertilizer application, on a contract basis to unrelated farmers?

Code 009, LOGGING OR LUMBERING, NOC.

- Note whether the insured cuts/fells trees by use of chain saws and/or a feller-buncher(s).
- List each piece of the insured’s logging equipment, other equipment and vehicles being used by their manufacturer (make) and model number- ex. Feller-buncher, skidders (grapple or cable), trucks, loaders, etc.
- Does the insured exclusively, or in part, clear tracts of land for construction or new rights of way that involves the removal of more than a “handful” of trees? Basically, is the tract reasonably “forested?” If yes, note the method by which the trees are removed, the acreage of the tract, the distance cleared for the
new right of way and whether the insured sells the resulting logs, chips the logs and sells the chips or simply burns the logs.

- Provide the insured’s respective revenue percentages developed in logging by chain saws and by feller-bunchers. Factor any land clearing tree removal into the relevant logging method percentage.
- In the event the insured performs logging by two methods (e.g., chain saws and feller-bunchers) note whether there are separate staffs per logging method or whether employees interchange between methods.
- Will the insured haul the logs that he creates from the logging site to a sawmill or another customer? Will the insured haul or also haul logs created by other logging businesses? Break down the log hauling percentages between hauling logs created by the insured and hauling logs created by unrelated businesses. Is the log hauling separately staffed?
- In the event the insured also operates a sawmill, observe whether it is portable or permanently sited and separately staffed.
- If the insured is engaged in both logging and sawmill operations, note what percentage of the business is developed in each operation.
- In the event the insured’s sawmill utilizes the lumber produced therein to make wood products (e.g., roof trusses, pallets, furniture squares), observe whether the wood products manufacturing is performed by a separate staff and whether that work area is separately located. Indicate how the separation is accomplished (e.g., a different building, floor to ceiling partitions) and where the wood products are made in the diagram.

**Code 012, LANDSCAPE CONTRACTOR**

- Provide the overall business percentages, by income, for the various services being offered.
- Does the insured provide contract landscaping or lawn maintenance services or perform new landscaping installations? If yes, describe in detail.
- Do the lawn maintenance services include tree trimming? If yes, carefully note in the report the frequency with which tree trimming is performed (e.g., daily, once a week) and whether the employees so engaged perform this task with both feet on the ground or whether climbing a ladder or using aerial buckets is necessary. Also, note whether tree trimming is part of the overall service “package” or whether there are jobs that are principally for tree trimming.
- List the equipment used in the tree trimming/pruning work.
- Provide the percentage of revenue attributable to landscaping/lawn maintenance versus tree trimming or pruning.
- Do the insured’s tree care operations include pruning, removal (and also stump removal), spraying and/or fumigating? Does the tree pruning effort include the clearing of rights-of-way for utilities? Use a separate paragraph to depict the above listed tree care operations.
- Regarding tree removal note the frequency with which the insured will remove a tree(s). Will the insured remove or cut down a tree(s) daily, once a week, once a month or with what frequency?
- Will the insured perform snow removal work? If yes, briefly describe and advise of the percentage of the insured’s total revenue represented by the snow removal work.
- Does insured perform weed and/or brush spraying from trucks or by employees walking?
- specify if the insured is principally engaged in applying liquid fertilizer.
- Does the insured perform reseeding and/or planting at former surface mine sites that are being reclaimed? Does the insured have a separate staff for this work?
- Does the insured grow trees, shrubs or plants either in greenhouses or in fields? Note the number of greenhouses and/or acreage. Specify if the insured’s effort is principally Christmas tree growing.
- Does the insured also operate a “garden center” contiguous to the nursery and/or at a separate location? Give a representative listing of the “garden center” merchandise, note if there is a separate/dedicated staff working exclusively in the garden center(s) and provide the percentages for sales to landscaping contractors versus to homeowners.
- Does the insured install artificial turf? If yes, will the employees prepare the ground surface for the artificial turf installation or will this part be outsourced.
- Does the insured harvest Christmas trees for unrelated Christmas tree raisers?
- Will the insured accept land-clearing jobs? If yes, factor this into the business percentages and carefully note the tasks the insured will perform and tasks that the insured will typically outsource. Does the insured
clear or remove of brush using mechanical equipment such as bulldozers, hydroaxes or other similar/type equipment? Try to ascertain the size of the lots or acreage cleared.

**Code 015, LOGGING OR LUMBERING – MECHANIZED**
- Note whether the insured cuts/fells trees by use of chain saws and/or a feller-buncher(s).
- List each piece of the insured's logging equipment, other equipment and vehicles being used by their manufacturer (make) and model number- ex. Feller-buncher, skidders (grapple or cable), trucks, loaders, etc.
- Does the insured exclusively, or in part, clear tracts of land for construction or new rights of way that involves the removal of more than a “handful” of trees? Basically, is the tract reasonably “forested?” If yes, note the method by which the trees are removed, the acreage of the tract, the distance cleared for the new right of way and whether the insured sells the resulting logs, chips the logs and sells the chips or simply burns the logs.
- Provide the insured’s respective revenue percentages developed in logging by chain saws and by feller-bunchers. Factor any land clearing tree removal into the relevant logging method percentage.
- In the event the insured performs logging by two methods (e.g., chain saws and feller-bunchers) note whether there are separate staffs per logging method or whether employees interchange between methods.
- Will the insured haul the logs that he creates from the logging site to a sawmill or another customer? Will the insured haul or also haul logs created by other logging businesses? Break down the log hauling percentages between hauling logs created by the insured and hauling logs created by unrelated businesses. Is the log hauling separately staffed?
- In the event the insured also operates a sawmill, observe whether it is portable or permanently sited and separately staffed.
- If the insured is engaged in both logging and sawmill operations, note what percentage of the business is developed in each operation.
- In the event the insured’s sawmill utilizes the lumber produced therein to make wood products (e.g., roof trusses, pallets, furniture squares), observe whether the wood products manufacturing is performed by a separate staff and whether that work area is separately located. Indicate how the separation is accomplished (e.g., a different building, floor to ceiling partitions) and where the wood products are made in the diagram.

**Code 025, MINING**
- What mineral(s) does the insured mine/quarry?
- List the trade name and/or chemical name for each mineral extracted.
- Describe the process used to mine/quarry for the materials (drilling, blasting, underground, surface, etc.).
- Will the insured process the ore such as crushing, cutting or polishing?
- Does the insured perform the processing of products only, with no mining or quarrying involved?

**Code 028, OIL OR GAS PRODUCTION**
- Does the insured own, operate or lease a gas/oil well?
- Does the insured provide a maintenance service for unrelated concerns operating gas/oil wells? If so, describe the maintenance services performed.
- Will the insured perform any drilling (contract or otherwise)?

**Code 050, QUARRIES**
- What mineral(s) does the insured mine/quarry?
- List the trade name and/or chemical name for each mineral extracted.
- Describe the process used to mine/quarry for the materials (drilling, blasting, underground, surface, etc.).
- Will the insured process the ore by crushing, cutting or polishing?
- Does the insured perform the processing of products only, with no mining or quarrying involved?

**Code 051, QUARRY**
- What mineral(s) does the insured mine/quarry?
• List the trade name and/or chemical name for each mineral extracted.
• Describe the process used to mine/quarry for the materials (drilling, blasting, underground, surface, etc.).
• Will the insured process the ore by crushing, cutting or polishing?
• Does the insured perform the processing of products only, with no mining or quarrying involved?

**Code 055, SAND EXCAVATION**

• What mineral(s) does the insured mine/quarry?
• List the trade name and/or chemical name for each mineral extracted.
• Describe the process used to mine/quarry for the materials (drilling, blasting, underground, surface, etc.).
• Will the insured process the ore by crushing, cutting or polishing?
• Does the insured perform the processing of products only, with no mining or quarrying involved?

**Code 059, MINERAL MILLING**

• Fully describe the insured’s milling operations.
• Describe type of milling performed i.e., crushing, grinding etc.
• List minerals/items milled by percentage.

**Code 101, GRAIN MILLING**

• If the insured operating as an animal feed and/or breakfast cereal manufacturer, list the items produced.
• Is the insured primarily engaged in the milling of grain and/or flour?
• If the milling services are performed for unrelated concerns, indicate for whom the services are provided.
• Are the milling services performed at a permanent location or does the insured offer portable milling services that are performed at the client’s locations?
• If the insured performs milling and also sells merchandise, provide the overall business percentages for milling versus the store and ask the stock store questions (be sure to note any employee interchange and the presence of separate work areas).
• List the raw materials and equipment/tools/machinery used.

**Code 103, SUGAR REFINING**

• If the insured is operating as a beet sugar, cornstarch, glucose and/or molasses manufacturer, list the items typically produced.
• If the insured is engaged in sugar cane/wet corn milling and/or sugar, syrup and molasses refining, describe the milling/refining operations in detail.
• If the milling/refining services are performed for unrelated concerns, indicate for whom the milling/refining services are provided.
• List the raw materials and equipment/tools/machinery used.

**Code 104, FOOD SUNDRIES MFG.**

• If the insured is engaged in food product and flavor/medicinal extract preparation or manufacturing, list the items typically prepared/produced.
• Is the insured engaged in coffee grinding and roasting?
• If the insured engages in the manufacturing of blocks of ice, advise if this operation includes dry ice manufacturing.
• Is the insured engaged in pizza assembly, without baking?
• Is the insured engaged in the mixing/blending or milling of flour or sugar?
• List the raw materials and equipment/tools/machinery used in this endeavor.

**Code 105, BAKERY**

• List the raw materials and equipment/tools/machinery used in the manufacturing process.
• List, and provide the overall business percentages for, the items being produced.
• Provide the overall business percentages, by income, for sales to commercial customers (such as retailers, restaurants, grocery stores) versus to members of the general public.
• If the insured has other locations that sell baked goods to the general public, be sure to provide the addresses of the insured’s satellite locations and note if there are separate crews staffing these additional locations.
• What percentage of the insured’s baked goods are sold to unrelated concerns versus through their own satellite locations?

**Code 106, PROCESSED MEAT PRODUCTS MFG.**
• If the insured operates as a manufacturer of meat products, list, and provide the overall business percentages for, the items typically produced.
• Describe the meat product manufacturing processes from beginning to end and elaborate on the process from which the insured’s meat products are produced (i.e. cooking, smoking, pickling, etc.).
• List the raw materials used by the insured in their manufacturing operations. How are these raw materials received (i.e. carcass form, in boxes, etc.)?
• Does the insured’s operations include handling and/or slaughtering livestock? If so, elaborate on this situation.

**Code 107, CANDY MFG.**
• If the insured operates as a candy, chocolate and/or chewing gum manufacturer, list, and provide the overall business percentages for, the items typically produced.
• List the raw materials used by the insured.

**Code 108, BREWERY**
• If the insured operates a brewery, list, and provide the overall business percentages for, the beverages typically produced.
• Does this operation include bottling, canning and/or filling kegs?
• List the raw materials and equipment/machinery used by the insured in the manufacturing operations.
• Does the insured operate separate facilities that are exclusively engaged in distribution activities? If so, provide the addresses of these facilities and a brief describe of the activities that take place at each. What percentage of the beverages distributed at these facilities are brewed by the insured?
• If insured operates a brewery or microbrewery and also a restaurant, provide the overall business percentages for each exposure and also note the percentage of beer sold through the restaurant versus to unrelated customers. Are there separate crews for the brewery and the restaurant?

**Code 109, DAIRY PRODUCTS MFG.**
• If the insured operates as a manufacturer of dairy products, list, and provide the overall business percentages for, the items typically produced.
• If the insured also engages in the manufacturing of ice cream, briefly describe this exposure.
• Does a separate crew of employees in a physically separate area perform the ice cream manufacturing?
• List the raw materials used by the insured in conjunction with the manufacturing operations.

**Code 110, ICE CREAM MFG.**
• Is the insured operating as an ice cream, frozen yogurt/custard or water ice manufacturer? If so, list, and provide the overall business percentages for, the items typically produced.
• Describe the manufacturing processes from beginning to end.
• List the raw materials used by the insured in conjunction with the manufacturing operations.

**Code 111, SLAUGHTERHOUSE**
• If the insured engages in the slaughtering of animals, describe the slaughtering process and list the animal typically slaughtered by the insured.
• How many animals does the insured kill in a typical week or month (specify which)?
• How many days a week is slaughtering conducted?
• If the insured engages in the production of meat products from the slaughtered animals, list the meat products typically made by the insured.
• Briefly describe the meat product manufacturing process.
• Provide the overall business percentages of sales made to each type of customer.
• If insured sells merchandise other than fresh or cured meats, fish and/or poultry, provide the overall business percentages for the sales of fresh or cured meats, fish and/or poultry versus the other lines of merchandise (and specify what they are).

**Code 112, BEVERAGE MFG.**
• If the insured operates as a beverage manufacturer, list, and provide the overall business percentages for, the beverages typically produced.
• Describe the beverage manufacturing process.
• List the raw materials used by the insured in the beverage manufacturing operation?
• If the insured's operations includes the bottling or canning of carbonated beverages, describe.
• Does insured engage a separate crew to rent/fill/service vending machines?

**Code 113, PRESERVING OR CANNING OF FOOD**
• If the insured engages in the preserving or canning of foods, describe these activities in detail.
• List the food items typically preserved/canned by the insured.
• Is the insured engaged in juice manufacturing or alcoholic beverage distilling?
• If the insured manufactures fruit and vegetable food products (i.e. applesauce, jam, ketchup, pickle, sauerkraut, etc.), list the items typically produced.
• List the raw materials used in this endeavor.

**Code 114, RENDERING**
• If the insured operates a rendering plant, list, and provide the overall business percentages for, the items typically produced.
• Briefly describe the rendering/manufacturing process.
• Describe the insured's typical customer and note how the products are used.
• From what animal carcasses are the insured's products made.

**Code 115, TOBACCO PRODUCTS MFG.**
• If the insured operates as manufacturer of tobacco products, list, and provide the overall business percentages for, the items typically produced.
• Describe the manufacturing processes from beginning to end.
• List the raw materials used by the insured in their manufacturing operations.
• If this entity provides tobacco storage, stemming or re-drying services, describe these activities and advise for whom these services are provided?

**Code 119, MEAT PRODUCTS MFG.**
• If the insured operates as a manufacturer of meat products, list, and provide the overall business percentages for, the items typically produced.
• What percentage of the insured’s revenue is generated from the manufacturing the various products (ex. hamburger/hamburger patties, steak sandwiches and veal patties)?
• Describe the insured's meat product manufacturing processes from beginning to end.
• List the raw materials used by the insured in their manufacturing operations.

**Code 130, TEXTILE WASTE**
• List, and provide percentages for, the raw materials and the finished products.
• If insured operates a retail outlet, advise if it is operated by a separate crew, in a physically separate work area.
• List, and provide percentages for, the various lines of merchandise and provide percentages for sales to each type of customer.

**Code 132, SPINNING OR WEAVING**
• List, and provide percentages for, the raw materials and finished products.
• If insured operates a retail outlet, advise if it is operated by a separate crew, in a physically separate work area.
• List, and provide percentages for, the various lines of merchandise and provide percentages for sales to each type of customer.

**Code 134, KNIT GOODS MFG.**
• List, and provide percentages for, the raw materials and finished products.
• If insured operates a retail outlet, advise if it is operated by a separate crew, in a physically separate work area, operates it.
• List, and provide percentages for, the various lines of merchandise and provide percentages for sales to each type of customer.
• Does insured perform subsequent mfg. of clothing or non-apparel textile products (if so, provide overall business percentages for knitting versus the subsequent mfg.

**Code 135, HOSIERY MFG.**
• List, and provide percentages for raw materials and finished products.
• If insured operates a retail outlet, advise if it is operated by a separate crew, in a physically separate work area.
• List, and provide percentages for, the various lines of merchandise
• Provide percentages for sales to each type of customer.

**Code 136, EMBROIDERY MFG.**
• List, and provide percentages for, the raw materials and finished products.
• If insured operates a retail outlet, advise if it is operated by a separate crew, in a physically separate work area.
• List, and provide percentages for, the various lines of merchandise
• Provide percentages for sales to each type of customer.
• Is insured a specialist contractor performing monogramming?
• Does a separate crew, in a physically separate work area, manufacture mattresses or box springs?

**Code 139, DYEING**
• List, and provide percentages for, the raw materials and finished products.
• If insured operates a retail outlet, advise if it is operated by a separate crew, in a physically separate work area.
• List and provide percentages for, the various lines of merchandise
• Provide percentages for sales to each type of customer.
• Does the insured perform dying in addition to manufacturing clothes or other textile products (e.g., spinning and weaving or knitting of cloth)?
• Provide the overall business percentages for dying performed on a contract basis for unrelated concerns versus dying performed for the insured’s own products.

**Code 141, LAUNDRY**
• Provide the overall business percentages for dry cleaning versus laundering versus carpet or upholstery cleaning.
• Does insured operate any separately staffed and located receiving, collecting or distributing stations?
• Does insured operate a self-service (coin-operated) laundromat?

**Code 142, DRY CLEANING PLANT**
• Provide the overall business percentages for dry cleaning versus laundering versus carpet or upholstery cleaning.
• Does insured operate any separately staffed and located receiving, collecting or distributing stations?
• Does insured operate a self-service (coin-operated) laundromat?

**Code 161, APPAREL MFG.**
• List, and provide percentages for, the raw materials and finished products.
• If insured operates a retail outlet, advise if it is operated by a separate crew, in a physically separate work area.
• List, and provide percentages for, the various lines of merchandise
• Provide percentages for sales to each type of customer.
• Does a separate crew, in a physically separate work area, perform knitting of cloth or fabric?
• Does insured subcontract out the sewing, but perform the cutting of the cloth and/or the distribution of the finished articles?

**Code 163, TEXTILE PRODUCTS MFG**
• List, and provide percentages for, the raw materials and finished products.
• If insured operates a retail outlet, advise if it is operated by a separate crew, in a physically separate work area.
• List, and provide percentages for, the various lines of merchandise
• Provide percentages for sales to each type of customer.
• Does a separate crew, in a physically separate work area, perform knitting of cloth or fabric?
• Does insured install, remove or repair furnishing goods (ex. draperies, slip covers) in the field? Is so, provide the overall percentages for mfg. versus field work.

**Code 165, MATTRESS OR BOX SPRING MFG.**
• List, and provide percentages for, the raw materials and finished products.
• Does a separate crew, in a physically separate work area, manufacture wire springs?
• If insured operates a retail outlet, does a separate crew, in a physically separate work area, operate it?
• List, and provide percentages for, the various lines of merchandise
• Provide percentages for sales to each type of customer.

**Code 166, CANVAS OR BURLAP PRODUCTS MFG.**
• List, and provide percentages for, the raw materials and finished products.
• Does insured install, remove or repair awnings, tents or other canvas products away from the shop (at the customers’ locations)?
• If insured operates a retail outlet, does a separate crew, in a physically separate work area, operate it?
• List, and provide percentages for, the various lines of merchandise
• Provide percentages for sales to each type of customer.

**Code 185, EMPLOYMENT CONTRACTOR – TEMPORARY FOOD SUNDRIES MFG., NOC**
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.
Code 187, EMPLOYMENT CONTRACTOR – TEMPORARY CANDY MFG.
For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.

Code 189, EMPLOYMENT CONTRACTOR – TEMPORARY PRESERVING OR CANNING
- For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.

Code 191, EMPLOYMENT CONTRACTOR – TEMPORARY APPAREL MFG.
- For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 201, TANNING
• List, and provide percentages for, the raw materials and finished products.
• Does the insured perform leather or fur processing such as tanning, dressing, dyeing or finishing (whether on owned merchandise or as a contract service)?
• Is the insured engaged in the sale or distribution of leather (not leather products)?

Code 204, SHOE MFG.
• List, and provide percentages for, the raw materials and finished products.
• Provide a step-by-step description of the manufacturing process.
• If the insured’s operations include leather tanning or dressing, what percentage of the insured’s total operation does such work represent? Is this work performed by a separate crew of employees in a physically separated work area?

Code 205, LEATHER GOODS MFG.
• List, and provide percentages for, the raw materials and finished products.
• Provide a step-by-step description of the manufacturing process.
• If the insured’s operations include leather tanning or dressing, what percentage of the insured’s total operation does such work represent? Is this work performed by a separate crew of employees in a physically separated work area?

Code 221, PLASTIC MFG. INJECTION MOLDING
• List, and provide percentages for, the raw materials and finished products (in particular, describe the form in which plastic is received from the insured’s suppliers - e.g., pellets, sheets, rods, etc.).
• Provide a step-by-step description of the manufacturing process.
• Does the insured manufacture its own molds?
• If the insured does manufacture its own molds, what percentage of these molds are sold to unrelated concerns rather than used in a subsequent plastic manufacturing operation?
• Is any mold making performed in a physically separate work area? Performed by a separate crew of employees?
• Provide the percentages for the various types of processes being used (ex. injection molding versus blow molding).
• Does the insured manufacture foam rubber or polyurethane foam products?
• Provide a complete listing of the equipment used in the manufacturing process.
• Provide copies of brochures or other printed materials illustrating the insured’s products.

Code 222, PLASTIC MFG.
• List, and provide percentages for, the raw materials and finished products (in particular, describe the form in which plastic is received from the insured’s suppliers - e.g., pellets, sheets, rods, etc.).
• Provide a step-by-step description of the manufacturing process.
• Provide the percentages for the various types of processes being used (ex. injection molding versus blow molding).
• Does the insured manufacture foam rubber or polyurethane foam products?
• Does the insured manufacture plastic composite products (for example, where a material such as fiberglass is combined with resin in order to create a stronger product)? If yes, describe the process in detail.
• Provide a complete listing of the equipment used in the manufacturing process.
• Provide copies of brochures or other printed materials illustrating the insured’s products.

**Code 225, RUBBER GOODS MFG.**
• List, and provide percentages for, the raw materials and finished products.
• Provide a step-by-step description of the manufacturing process.
• List all equipment used in the manufacturing process.
• Is the insured engaged in tire recapping or retreading?
• If insured operates an auto or truck repair garage, provide the overall business percentages for that exposure versus the recapping of tires and note if the latter exposure is performed by a separate crew, working in a physically separate work area.

**Code 227, OILCLOTH MFG.**
• List, and provide percentages for, the raw materials and finished products.
• Provide a step-by-step description of the manufacturing process.
• Does the insured manufacture plastic composite products (for example, where a material such as fiberglass is combined with resin in order to create a stronger product)? If yes, describe the process in detail.
• List all equipment used in the insured’s manufacturing/processing operations.
• Provide copies of brochures or other printed materials illustrating the insured’s products and/or services.

**Code 255, PAPER MFG.**
• List, and provide percentages for, the raw materials and finished products.
• Does the insured manufacture paper or operate a paper mill?
• Provide a step-by-step description of the manufacturing process.
• Does the insured provide contract paper services such as slitting, sheeting, winding, finishing, laminating, etc.? If yes, provide a detailed description of these services.
• List all equipment used in the insured’s manufacturing and/or processing operations.

**Code 257, PAPER PRODUCTS MFG., NOC**
(Refer to the Code 863 instructions for insureds principally engaged in shredding or destroying paper or sensitive documents for unrelated concerns)
• List, and provide percentages for, the raw materials and finished products.
• Does the insured manufacture paper/operate a paper mill?
• Provide a step-by-step description of the manufacturing process.
• Does the insured provide contract paper services such as slitting, sheeting, winding, finishing, laminating, etc.? If yes, provide a detailed description of these services.
• List all equipment used in the insured’s manufacturing and/or processing operations.

**Code 259, PAPER PRODUCTS MFG. NOC (DE only)**
• List, and provide percentages for, the raw materials and finished products.
• Does the insured manufacture paper/operate a paper mill?
• Provide a step-by-step description of the manufacturing process.
• Does the insured provide contract paper services such as slitting, sheeting, winding, finishing, laminating, etc.? If yes, provide a detailed description of these services.
• List all equipment used in the insured’s manufacturing and/or processing operations.

**Code 261, CORRUGATED BOX OR CONTAINER MFG.**
• Does the insured primarily manufacture corrugated boxes or containers?
• List, and provide percentages for, the raw materials and finished products.
• Does the insured manufacture paper/operate a paper mill?
• Provide a step-by-step description of the manufacturing process.
• Does the insured provide contract paper services such as slitting, sheeting, winding, finishing, laminating, etc.? If yes, provide a detailed description of these services.
• List all equipment used in the insured’s manufacturing and/or processing operations.

**Code 263, PAPER COATING/FINISHING**
• Is the insured primarily conforming contract paper coating or finishing?
• List, and provide percentages for, the raw materials and finished products.
• Does the insured manufacture paper/operate a paper mill?
• Provide a step-by-step description of the manufacturing process.
• Does the insured provide contract paper services such as slitting, sheeting, winding, finishing, laminating, etc.? If yes, provide a detailed description of these services.
• List all equipment used in the insured’s manufacturing and/or processing operations.

**Code 265, STATIONERY PRODUCTS MFG.**
• Is the insured primarily engaged in the manufacturing of stationary products?
• List, and provide percentages for, the raw materials and finished products.
• Does the insured manufacture paper/operate a paper mill?
• Provide a step-by-step description of the manufacturing process.
• Does the insured provide contract paper services such as slitting, sheeting, winding, finishing, laminating, etc.? If yes, provide a detailed description of these services.
• List all equipment used in the insured’s manufacturing and/or processing operations.

**Code 275, EMPLOYMENT CONTRACTOR – TEMPORARY PLASTICS MFG – INJECTION MOLDING**
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

**Code 276, EMPLOYMENT CONTRACTOR – TEMPORARY PLASTICS MFG., NOC**
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 281, PRINTING, NOC

• For printing businesses:
  1) Secure the make and model number for each printing unit (you may use the term “printing unit” in the event you do not wish to enter printing units as duplicators or presses on your reports. The classification analyst should decide which printing units are presses and which are duplicators based upon the information that you provide).
    a) Separately identify/list which printing units are sheet fed, which are web fed, which are photocopiers or which are for screen printing.
    b) For all sheet fed printing units excepting only the screen printing units, also cite the maximum sheet size that each sheet fed printing unit may utilize (it is not necessary to ask this question for screen printing units which may be screen printing a broad variety of substrates in addition to paper, e. g., apparel – t-shirts).
    c) For sheet fed printing units further observe which are offset and which are letterpresses.
    d) For web fed printing units note which are offset, gravure, letterpress or flexography.
    e) Indicate the width of the web for each web fed unit.
  2) The listing of sheet printing equipment will also note each printing unit’s color capacity. For this observe how many color towers each printing unit has. Also observe the following scenario as warranted: you are informed that a printing unit has four color capacity, but that printing unit has only two color towers, meaning printed product must be passed through that unit twice to achieve four color work.
  3) For letterpress printing units observe whether the insured uses such exclusively to finish (e.g., number pages, score or perforate) product printed on other printing units and/or whether the insured uses the letterpress units to print product.
  4) Break down overall print production between:
    a) That part printed on offset printing units with a maximum sheet size of 17 x 22 inches or less except for production on any four color tower unit or any Halm unit, for which separate business percentages shall be separately listed (four color tower sheet fed printing units made by Ryobi, e.g., the 3304H, or A. B. Dick Co. are offset printing units that use a paper size less than 17 x 22 inches, but these offset printing units will be construed to be presses and not duplicators. The duplicator is a “small” offset unit, and the four tower units’ size makes them more like a press than a duplicator. In other words, they are not “small.” Separately list the production percentages for such four color tower units. Halm printing units are for envelopes. They have perfector capacity (meaning they may print both sides concurrently) and their volume capacity is such that they are being construed as presses and not as duplicators.
    b) That part printed on offset units with a maximum sheet size greater than 17 x 22 inches.
    c) That part printed on letterpress units for sheets of any size.
d) That part printed on any type of web press unit.

e) That part printed on photocopiers for sheets of any size.

f) That part screen printed.

g) That part printed on four color tower printing units such as the Ryobi 3304H or similar A. B. Dick Co.
four color tower units.

h) That part printed on Halm units.

5) List the insured's materials.

a) Indicate whether paper is received in rolls or in sheets of what size. What part is received in rolls in relation to what part is received in sheets?
b) Will the rolls or the sheets be cut down prior to printing or as a part of the finishing process? Note that certain web presses have a "sheeter" capacity, which means such web press will cut printed product into sheets as the product leaves the press.

6) Provide a representative listing of the insured's printed product(s). If possible provide a percentage breakdown between different types of products and in particular products that may be assigned by an Underwriting Guide entry to different classes (e.g., newspapers – to Code 282, business forms – to Code 281).

7) Use separate paragraphs to depict the insured's pre-press and post-press operations (ex. finishing, including numbering pages, scoring, perforating, binding). For your information thermography is construed as a finishing operation (e.g., when printing invitations). Is there a separate bindery staff?

8) You may be informed the insured utilizes (or also utilizes) ink jet or digital printing units. Both may reproduce what is termed variable information, which is "different" information on a per copy basis. For example an ink jet unit may be used to print addresses and a digital unit may be used to print "personalized" letters for advertisers. In such case:

a) Separately identify the ink jet and the digital units.
b) Observe how the insured may utilize such units and separately list each type of unit's product.
c) Keep in mind that a digital unit may print using liquid ink or toner. For this reason indicate on a per digital unit basis which use liquid ink and which use toner. In the event liquid ink is used then the unit's maximum sheet size must also be indicated.
d) For business percentages: use the sheet size differentiation listed above if liquid ink is used (greater than 17 x 22 inches or 17 x 22 inches or less).
e) If toner is used such production may be construed as photocopying meaning sheet size is not pertinent.

9) The Code 281 and Code 282 class study found many screen printers also embroider. Does a separate staff in a physically separate work area perform the embroidery? How is the physical separation accomplished (e.g., a different floor, floor to ceiling partitions)?

10) The Code 281 and Code 282 class study also found that certain businesses print product and also perform direct mail. In such case:

a) Break down the insured's print production between that part utilized in/mailed by the insured's direct mail operation in relation to that part shipped to customers by the pallet (or however it may be shipped).
b) Break down the insured's overall business percentages between printing (shipped in pallets to customers) and direct mail.
c) Is the direct mail separately staffed and located in a physically separate work area? How is the physical separation accomplished (see Question 9 above)?
• **For publishers/printing outsourced operations:**
  A business eligible for assignment to Code 287 is a publisher of books, greeting cards, periodicals, sheet music or newspapers. The insured will perform the prepress work, outsource the publication(s)' printing and perform distribution and/or delivery of their publication(s).

  1) Identify the insured's publication(s) by type (e.g., a newspaper).
  2) If you can, obtain the name of the business that actually prints the publication(s).
  3) Identify and describe the publication distribution and/or delivery tasks performed. Distribution or delivery tasks may include but are not necessarily limited to: receiving printed publications from unrelated printers and placing into inventory, receiving pick tickets for orders, pulling the indicated publications from inventory and packing for shipping, cutting sheets of greeting cards printed by an unrelated concern(s) into individual cards, folding and placing cards into boxes or placing cards into inventory and packaging for shipment, picking up the printed publication at the unrelated printer's facility, labeling individual publications for mailing, placing the labeled publications into mailbags, delivering the mailbags to the Post Office, bundling publications and delivering bundled publications to stores for sale.
  4) Indicate employee interchange between tasks as warranted (e.g., prepress work and labeling for mailing).

**Code 282, NEWSPAPER PRINTING**

• Regarding equipment:
  1) Secure the make and model number for each printing unit (you may use the term “printing unit” in the event you do not wish to enter printing units as duplicators or presses on your reports. The classification analyst should decide which printing units are presses and which are duplicators based upon the information that you provide).

    a) Separately identify/list which printing units are sheet fed, which are web fed, which are photocopiers or which are for screen printing.

    b) For all sheet fed printing units excepting only the screen printing units, also cite the maximum sheet size that each sheet fed printing unit may utilize (it is not necessary to ask this question for screen printing units which may be screen printing a broad variety of substrates in addition to paper, e.g., apparel – t-shirts).

    c) For sheet fed printing units further observe which are offset and which are letterpresses.

    d) For web fed printing units note which are offset, gravure, letterpress or flexography.

    e) Indicate the width of the web for each web fed unit.

  2) The listing of sheet printing equipment will also note each printing unit's color capacity. For this observe how many color towers each printing unit has. Also observe the following scenario as warranted: you are informed that a printing unit has four color capacity, but that printing unit has only two color towers, meaning printed product must be passed through that unit twice to achieve four color work.

  3) For letterpress printing units observe whether the insured uses such exclusively to finish (e.g., number pages, score or perforate) product printed on other printing units and/or whether the insured uses the letterpress units to print product.

  4) Break down overall print production between:

    a) That part printed on offset printing units with a maximum sheet size of 17 x 22 inches or less except for production on any four color tower unit or any Halm unit, for which separate business percentages shall be separately listed (four color tower sheet fed printing units made by Ryobi, e.g., the 3304H, or A. B. Dick Co. are offset printing units that use a paper size less than 17 x 22 inches, but these offset printing units will be construed to be presses and not duplicators. The duplicator is a "small" offset unit, and the four tower units' size makes them more like a press than a duplicator. In other words, they are not "small." Separately list the production percentages for such four color tower units. Halm printing units are for envelopes. They have perfector capacity (meaning they may print both sides...
concurrently) and their volume capacity is such that they are being construed as presses and not as duplicators.

b) That part printed on offset units with a maximum sheet size greater than 17 x 22 inches.

c) That part printed on letterpress units for sheets of any size.

d) That part printed on any type of web press unit.

e) That part printed on photocopiers for sheets of any size.

f) That part screen printed.

g) That part printed on four color tower printing units such as the Ryobi 3304H or similar A. B. Dick Co. four color tower units.

h) That part printed on Halm units.

• List the insured's materials.
  a) Indicate whether paper is received in rolls or in sheets of what size. What part is received in rolls in relation to what part is received in sheets? Provide the different paper sizes the insured prints on, by percentage.
  b) Will the rolls or the sheets be cut down prior to printing or as a part of the finishing process? note that certain web presses have a "sheeter" capacity, which means such web press will cut printed product into sheets as the product leaves the press.

• Use separate paragraphs to depict the insured's pre-press and post-press operations (ex. finishing, including numbering pages, scoring, perforating, binding). For your information thermography is construed as a finishing operation (e.g., when printing invitations). Is there a separate bindery staff?

• Identify the insured’s publication(s) by type (e.g., newspapers, catalogues, comic books, magazines, newspaper inserts, periodicals, statistical reports, telephone books or trade journals. Provide an overall percentage breakdown of printed product between any of the publications listed in this question in relation to non-publication product (e.g., commercial printing – business forms).

• Describe any printing work being performed.

• Provide the overall business percentages, by income, for each type of product/document being printed.

• If printing is outsourced, ask for the name of the business that actually prints the publication(s).

• Is the printing of non-publication product (e.g. commercial printing) separately staffed and conducted in a physically separate work area?

• Break down the commercial print production between that part printed on sheet fed printing units in relation to that part printed on web fed printing units.

• If printing is outsourced, identify and describe the publication distribution and/or delivery tasks performed. Distribution or delivery tasks may include but are not necessarily limited to: receiving printed publications from unrelated printers and placing into inventory, receiving pick tickets for orders, pulling the indicated publications from inventory and packing for shipping, cutting sheets of greeting cards printed by an unrelated concern(s) into individual cards, folding and placing cards into boxes or placing cards into inventory and packaging for shipment, picking up the printed publication at the unrelated printer’s facility, labeling individual publications for mailing, placing the labeled publications into mailbags, delivering the mailbags to the Post Office, bundling publications and delivering bundled publications to stores for sale.

• Indicate employee interchange between tasks as warranted (e.g., prepress work and labeling for mailing).

• If none of the preceding questions apply, provide a detailed description of the insured’s operations.

Code 285, PRINTING SHEET-FED PRESS

• Refer to the standard questions for Code 281, Printing, especially those for Printing Businesses, and Code 282, as needed.

Code 287, PUBLISHER – PRODUCT DISTRIBUTION
(Discontinued in Pennsylvania effective 12/1/08; still in effect for Delaware)

• Identify the insured's publication(s) by type (e.g., a newspaper).

• If you can, obtain the name of the business that actually prints the publication(s).

• Identify and describe the publication distribution and/or delivery tasks performed. Distribution or delivery tasks may include but are not necessarily limited to: receiving printed publications from unrelated printers and placing into inventory, receiving pick tickets for orders, pulling the indicated publications from
inventory and packing for shipping, cutting sheets of greeting cards printed by an unrelated concern(s) into individual cards, folding and placing cards into boxes or placing cards into inventory and packaging for shipment, picking up the printed publication at the unrelated printer’s facility, labeling individual publications for mailing, placing the labeled publications into mailbags, delivering the mailbags to the Post Office, bundling publications and delivering bundled publications to stores for sale.

- Indicate employee interchange between tasks as warranted (e.g., prepress work and labeling for mailing).

**Code 291, EMPLOYMENT CONTRACTOR – TEMPORARY PAPER OF PULP MFG.**
- For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only expose is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.

**Code 297, EMPLOYMENT CONTRACTOR – TEMPORARY PRINTING**
- For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only expose is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.

**Code 301, SAWMILL**
- List, and provide percentages for, raw materials and finished products.
• If insured performs some type of field installation work, provide the overall business percentages for manufacturing versus field installation/repairing work.
• Advise if the field work is performed by a separate crew.
• If a separate crew, in a physically separate work area, performs subsequent mfg. of wood products, list, and provide percentages for raw materials and finished products.
• Does a separate crew perform logging?

**Code 305, CARPENTRY SHOP**
- List, and provide percentages for, raw materials and finished products.
- If insured performs some type of field installation work, provide the overall business percentages for manufacturing versus field installation/repairing work.
- Advise if the field work is performed by a separate crew.
- Does a separate crew, in a physically separate work area, engage in the sale of lumber and/or building materials?
- Is there a separate store crew working in a physically separate outlet selling hardware, paint and similar merchandise?
- If insured performs field erection work, provide percentages for residential versus commercial work and list the trades being performed.
- Specify for which trades the insured engages separate crews and list, and provide percentages for, the various types of jobs being performed.

**Code 306, WOODENWARE MFG., NOC**
- List raw materials by percentage.
- Specify equipment used in manufacturing process.
- List final products by percentage.

**Code 311, CABINET WORKS**
- List, and provide percentages for, raw materials and finished products.
- If insured performs some type of field installation work, provide the overall business percentages for manufacturing versus field installation/repairing work.
- Advise if the field work is performed by a separate crew.
- Does a separate crew, in a physically separate work area, perform upholstering of the products?

**Code 319, FURNITURE ASSEMBLY**
- List, and provide percentages for, raw materials and finished products.
- Does insured use power-driven equipment?
- Does a separate crew, in a physically separate work area, perform upholstering of the products?

**Code 323, FURNITURE MFG.**
- List, and provide percentages for, raw materials and finished products.
- Does a separate crew, in a physically separate work area, perform upholstering of the products?
- If insured performs field installation work, is this performed by a separate crew?

**Code 327, FURNITURE UPHOLSTERING, SHOP**
- List, and provide percentages for, raw materials and finished products.
- Does a separate crew, in a physically separate work area, manufacture or assemble wood or metal furniture (if “yes”, provide the overall business percentages for mfg. or assembling versus upholstering).
- Does the insured manufacture frames?
- Does the insured perform upholstering at customers’ locations?

**Code 402, SMELTING OR GALVANIZING**
- If the insured engages in smelting, provide a step by step description of the smelting process.
- Does the insured’s operation include the handling of ferrous metals?
• If the insured engages in selling scrap metal, provide the percentage of the insured’s overall revenue that is attributable to the sale of scrap metals.
• If the insured applies molten zinc to metals in order to protect the metals against erosion (also known as galvanizing), provide a step by step description of the galvanizing process.
• If the insured uses materials other than zinc as coatings, list those materials.
• If the insured performs manufacturing work, list and provide percentages for, the various types of items being manufactured.

**Code 403, ROLLING, DRAWING OR EXTRUDING NONFERROUS METALS**
• List all materials handled by the insured by size and dimension (does the insured handle any ferrous metals)?
• List the form in which the materials handled by the insured are received (e.g., plate, sheet, coil, etc.).
• If the insured engages in rolling, drawing, extruding or forging activities, provide a step by step description of the processes involved.
• If the insured engages in fabricating products, provide a listing of the types of products fabricated by percentage (and be sure to note the percentage for fabricating pipe or tubes).
• Provide a step by step description of the fabrication process.

**Code 404, STEEL MFG.**
• List all materials handled by the insured by size and dimension. Is the insured limited to handling ferrous metals, or will it handle or process non-ferrous metals?
• Note the form in which metals are received by the insured.
• If the insured manufactures steel or operate a blast furnace, provide a step by step description of the processes involved.
• If the insured operates a rolling or drawing mill, provide a step by step description of the rolling or drawing process. Does the insured also operate a steel furnace?
• If the insured is engaged in manufacturing specific products, provide a listing of the products manufactured by percentage.

**Code 406, ROLLING MILL**
• List, and provide percentages for, the raw materials and the finished products.
• Is insured operating an open-hearth, Bessemer, Electric or crucible steel furnace?
• Does the manufacturing process create a product that is thinner than the raw material?

**Code 407, TUBE MFG.**
• List, and provide percentages for, the raw materials and the finished products.
• Does insured manufacture steel?

**Code 411, STEEL FABRICATING**
• List the types products by the insured by percentage.
• Provide a step by step description of the fabrication process.
• List all of the raw materials by size and dimension.
• If the insured installs or erects the products, provide the overall business percentages for shop versus field work.
• List the types of items installed or erected by percentage and provide a description of the installation or erection work.

**Code 413, IRON WORKS**
• List, and provide percentages for, the raw materials and the finished products.
• Provide the overall business percentages for manufacturing versus installations.

**Code 415, FABRICATED PLATE WORK**
• List, and provide percentages for, the raw materials and the finished products.
• Provide the gauges for all sheet/plate metals used.
• Be sure to provide separate percentages for sheet metal raw materials less than ¼ inch thick versus materials ¼ inch or thicker.
• Does insured cut steel plate to create the products or is the plate received pre-cut and then simply machined by the insured?
• Provide the overall business percentages for manufacturing versus installations.

Code 416, CAR MFG.
• List, and provide percentages for, the raw materials and the finished products.
• Does insured primarily rebuild or repair railroad, freight or mining cars in a shop setting?
• Provide the overall business percentages for shop manufacturing/repairing versus repairs made in the field (and specify if there are separate crews for shop versus field).

Code 421, STEEL FOUNDRY
• Does the insured operate a foundry?
• List, and provide the overall business percentages for the various products being made.
• List, and provide the overall business percentages for the various raw materials being used (distinguish between ferrous and non-ferrous raw materials).
• Are castings subsequently machined (i.e., secondary machining) by a separate crew of employees in a physically separate work area?
• How are the final products used by the customers?

Code 425, IRON FOUNDRY
• Does the insured operate a foundry?
• List, and provide the overall business percentages for the various products being made.
• List, and provide the overall business percentages for the various raw materials being used (distinguish between ferrous and non-ferrous raw materials).
• Are castings subsequently machined (i.e., secondary machining) by a separate crew of employees in a physically separate work area?
• How are the final products used by the customers?

Code 427, MALLEABLE FOUNDRY
• Does the insured operate a foundry?
• List, and provide the overall business percentages for the various products being made.
• List, and provide the overall business percentages for the various raw materials being used (distinguish between ferrous and non-ferrous raw materials).
• Are castings subsequently machined (i.e., secondary machining) by a separate crew of employees in a physically separate work area?
• How are the final products used by the customers?

Code 429, DIE CASTING MFG.
• Describe the manufacturing process?
• Does the insured pour liquid into molds, or is the liquid forced into dies to form the desired shape(s)?
• List raw materials used by type and percentage.
• Are castings subsequently machined (i.e., secondary machining) by a separate crew of employees in a physically separate work area?
• How are the final products used by the customers?

Code 431, FORGING
• What types of raw materials are used by the insured (e.g., ferrous/non-ferrous)
• Describe the insured’s manufacturing process?
• Does the insured use a forging technique to produce any products?
• List products produced by type and percentage.
• Note if the insured maintains a separate crew to perform any secondary machining of the products (ex. drilling or boring of the products)
Code 433, TOOL MFG.
- List, and provide the percentages for, the various raw materials being used and be sure to distinguish between ferrous and non-ferrous materials.
- Describe the insured’s manufacturing process (does the insured use a forging technique to produce any products)?
- List products produced by type and percentage.

Code 435, SPRING MFG.
- List, and provide the percentages for, the various raw materials being used and be sure to distinguish between ferrous and non-ferrous materials.
- Describe the insured’s manufacturing process (does the insured use a forging technique to produce any products)?
- List products produced by type and percentage.

Code 441, TOOL MFG.
- Is the insured a job shop? This simply means all of the insured’s work is for unrelated businesses and the insured has no proprietary product(s).
- Identify and list the insured’s materials by their dimensions and percentages.
- Identify and list the insured’s products by percentages.
- In the event the product is a tool, die, mold or pattern also provide the relative percentages for that part of the tool, die, mold or pattern production that is packed and shipped to unrelated customers in relation to that part of the tool, jig, fixture, die, mold or pattern production that is taken to another area of the insured’s premises to perform machining, metal stamping, plastic or powdered metal molding, die casting, foundry or another type of production operation. Describe that other type of production operation using the standard Code 221, Code 222, Code 429, Code 454, Code 461, Code 506 or foundry classes standard questions as warranted.
- Is the insured’s product a “complete” die and/or mold and/or replacement parts for dies and/or molds? Note that part of the insured’s revenue developed by making “complete” dies and/or molds in relation to that part of the of the insured’s overall revenue derived from making parts for either dies and/or molds.
- Is the machining area climate controlled year round?
- When listing the insured’s equipment be certain to separately identify each CNC or EDM or another type of programmable unit.

Code 442, HAND TOOL MFG – NON-FORGED
(Discontinued in Pennsylvania effective 12/1/10; still in effect for Delaware)
- Identify and list the insured’s materials by their dimensions and percentages.
- Identify and list the insured’s products by percentages.
- Describe the operations in a step-by-step narrative. In the event the insured performs forging, note what part of the materials are forged.

Code 443, SAW BLADE
(Discontinued in Pennsylvania effective 12/1/10; still in effect for Delaware)
- Identify and list the insured’s materials by their dimensions and percentages.
- Identify and list the insured’s products by percentages.
- Describe the operations in a step-by-step narrative.

Code 445, HARDWARE MFG.
- List, and provide percentages for, raw materials and finished products.
- Does the insured primarily perform any polishing or buffing of parts?
- Does the insured primarily perform any spray painting or coating of metals?
- If the insured operate a foundry, describe. Does the insured use silica sand?

Code 446, MACHINED PARTS MFG., N.O.C.
• Does the employer machine single piece parts? If yes, provide examples of the single piece parts that the employer machines. If possible, provide percentages for each type of single piece part machined.

• What percentage of the employer’s business involves machining on a job shop basis, where the employer machines parts for unrelated customers according to the customers’ specifications?

• What percentage of the employer’s business involves the machining of the employer’s own proprietary product(s)?

• If applicable, provide the types of proprietary products that the employer machines by percentage.

• What percentage of the single piece parts that the employer machines is sold/shipped as is (with no further assembly by the employer of the single piece parts into end product components)?

• What percentage of the single piece parts that the employer machines is then assembled by the employer into end product components? Assembly operations may include but are not limited to: welding, fastening, inserting, pressing and the joining of springs, ball bearings, gears or components to any other part or component.

• Is the employer engaged in 3D printing, also known as additive manufacturing? If yes, describe and provide the percentage of the employer's total revenue that is attributable to this effort.

• Please list the raw materials used by the employer by type (e.g., bar stock), size and dimension, and percentage.

Code 447, NON-FERROUS METALS FOUNDRY

• Does the insured operate a foundry?

• List, and provide the percentages for, the various raw materials being used and be sure to distinguish between ferrous and non-ferrous materials.

• Are castings subsequently machined (i.e., secondary machining) by a separate crew of employees in a physically separate work area?

• List, and provide percentages for the various products.

• How do the customers use the final products?

• If the insured uses silica in the foundry process, advise of the type of sand being used.

Code 449, ELECTROPLATING

• List, and provide the percentages for, the various raw materials being used.

• Does the insured put coatings on metal products?

• Fully describe the coating process, noting all techniques used (and the percentage for each).

Code 451, AUTOMOBILE BODY MFG.

• List, and provide percentages and dimensions, for raw materials (including a percentage breakdown for wood versus metal). For any sheet steel materials this will include the thickness thereof in inches or by the gauge.

• List the parts the insured will fabricate and separately list parts purchased by the insured or whose production the insured has outsourced to an unrelated concern.

• Separately describe the parts fabrication work (e.g., the stamping of doors, fenders or hoods) in a step-by-step narrative and advise of the percentage of parts fabricated versus the percentage of parts purchased/outsourced.

• List, and provide percentages for, the products being manufactured, assembled or rebuilt by the insured and use a step-by-step narrative to describe how each type of product is manufactured, assembled or rebuilt.

• If the insured fabricates/assembles an automobile or truck body, note whether the insured will ship that product as such or will the insured attach a fabricated/assembled body onto a chassis provided by the
customer or purchased by the insured for the customer or will the insured also assemble/fabricate the chassis.

- Note any physical separation between departments and how that physical separation is accomplished: floor to ceiling partitions, separate floors, separate buildings or how.
- Does the insured produce a complete vehicle?

**Code 454, SHEET METAL PRODUCTS FABRICATION NOC**
- Does the insured operate a fabrication shop? If yes, provide the types of products fabricated by percentage.
- List, and provide the percentages for, the various raw materials being used (and distinguish between sheet metal less than ¼ inch thick versus sheet/plate ¼ inch or thicker).
- Provide the gauges for all sheet/plate metals used.
- Does the insured perform installation work? If yes, provide the types of items installed by percentage and describe the installation process.

**Code 456, METAL FURNITURE**
- List, and provide the percentages for, the various raw materials being used (and distinguish between sheet metal less than ¼ inch thick versus sheet/plate ¼ inch or thicker).
- Provide the gauges for all sheet/plate metals used.
- List by type and percentage the items produced by the insured.
- If the insured installs any of the products, provide the overall business percentages for shop versus field work and note if a separate crew performs the field work.
- If the insured installs any of the products, list, and provide percentages for, the various types of items being installed.

**Code 457, WIRE GOODS MFG.**
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- How are the products used by the customers?

**Code 458, JEWELRY MFG.**
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- How are the products used by the customers?

**Code 459, EYELET MFG.**
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- How are the products used by the customers?

**Code 461, MACHINE SHOP**
- Is the employer a job shop? This simply means all of the employer's work is for unrelated businesses and that the employer has no proprietary products.
- Does the employer manufacture one or more proprietary products? If yes, please identify each.
- Please list the various shop materials by their types, (e.g., bar stock), dimensions and percentages.
- For whatever the employer makes please describe the production procedures in a step-by-step narrative.
- Does the employer ship machine single-piece parts?
- Please try to identify the types of single-piece parts machined by the employer (e.g., automobile engine parts). Please note percentages when you can.
• Does the employer ship single-piece parts “as is” or as assembled parts? Please provide a percentage breakdown between single-piece parts “as is” versus assembled parts.
• What percentage (if any) of the employer’s single-piece parts production does the employer then assemble into end-product components? Assembly operations may include but are not limited to welding, fastening, inserting, pressing and the joining of springs, ball bearings, gears or other parts or components to any other part or component.
• Does the employer provide a service such as finish grinding or welding for unrelated businesses?
• Please provide a breakdown of the overall revenue percentages of the employer’s different products (e.g., single-piece parts, pumps, a type of industrial machinery).
• When listing the employer’s equipment be certain to separately identify each CNC or EDM or another type of programmable unit.
• If the employer has a brochure describing his proprietary product(s) please provide copies or make certain to provide the employer’s website address.

Code 463, AUTOMOBILE MFG.
• Is this entity engaged in the complete manufacturing and/or assembly of automobiles, trucks, and/or bicycles?
• Are the vehicles produced on an assembly-line?
• List, and provide percentages and dimensions, for raw materials (including a percentage breakdown for wood versus metal). For any sheet steel materials this will include the thickness thereof in inches or by the gauge.
• List the parts the insured will fabricate and separately list parts purchased by the insured or whose production the insured has outsourced to an unrelated concern.
• Separately describe the parts fabrication work (e.g., the stamping of doors, fenders or hoods) in a step-by-step narrative and advise of the percentage of parts fabricated versus the percentage of parts purchased/outsources.
• List, and provide percentages for, the products being manufactured, assembled or rebuilt by the insured and use a step-by-step narrative to describe how each type of product is manufactured, assembled or rebuilt.
• If the insured fabricates/assembles an automobile or truck body, note whether the insured will ship that product as such or will the insured attach a fabricated/assembled body onto a chassis provided by the customer or purchased by the insured for the customer or will the insured also assemble/fabricate the chassis.
• Note any physical separation between departments and how that physical separation is accomplished: floor to ceiling partitions, separate floors, separate buildings or how.

Code 464, MACHINERY MFG. NOC (DE only)
• List, by types and percentages, the raw materials used in the production process (including gauges, where applicable)?
• List, by types and percentages, the items produced.
• Describe the typical customer.

Code 465, CONVEYOR MFG.
• Is the insured engaged in the manufacturing of conveyors, elevators, escalators, hoisting systems and/or overhead cranes? If so, list and describe the items produced.
• Who is the insured’s typical customer and how is the insured’s final product used?
• Describe the manufacturing process from beginning to end.
• List the raw material and equipment/tools/machinery used in the manufacturing process.
• If the insured engages in reconditioning conveyors, elaborate on the reconditioning operations.
• What percentage of the reconditioning work is performed at the insured’s facility versus at the client’s location?
• If the insured engages in the erection, installation or repair of conveyors, elevators, escalators, hoisting systems and/or overhead cranes, this work in detail.
• Does the insured have a separate crew of employees for the manufacturing and the installation/erection/repair work or do employees interchange between jobs?

**Code 467, BALL BEARING MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?

**Code 471, PRINTED CIRCUIT BOARD ASSEMBLY OR ELECTRICAL WIRE HARNESS MFG. – BY CONTRACTOR**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?

**Code 472, ELECTRONIC COMPONENT MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?

**Code 473, ELECTRICAL APPARATUS MFG., NOC**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured performs shop and field work, provide the percentages for each and note if there are separate crews.

**Code 474, ELECTRIC POWER OR ELECTRIC TRANSMISSION EQUIPMENT MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured is manufacturing transformers, are these transformers greater than 746 watts?

**Code 475, BATTERY MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?

**Code 476, INDUSTRIAL CONTROLS OR SYSTEMS MANUFACTURE/ASSEMBLY**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured performs shop and field work, provide the percentages for each and note if there are separate crews.

**Code 477, ELECTRIC MOTOR MFG. OR REPAIR**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured performs shop and field work, provide the percentages for each and note if there are separate crews.

**Code 483, OFFICE MACHINE MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured performs shop and field work, provide the percentages for each and note if there are separate crews.

**Code 485, COMMUNICATIONS, SEARCH, DETECTION OR SIGNAL PROCESSING EQUIPMENT MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured performs shop and field work, provide the percentages for each and note if there are separate crews.

**Code 486, INCANDESCENT LIGHT BULB OR ELECTRONIC TUBE MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured performs shop and field work, provide the percentages for each and note if there are separate crews.

**Code 487, SURGICAL OR OPTICAL INSTRUMENT MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured performs shop and field work, provide the percentages for each and note if there are separate crews.

**Code 488, ELECTRONIC MEASURING OR ANALYTICAL INSTRUMENT MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• How are the products used by the customers?
• If the insured performs shop and field work, provide the percentages for each and note if there are separate crews.

**Code 489, DENTAL LABORATORY**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.

**Code 491, EMPLOYMENT CONTRACTOR – TEMPORARY ROLLING, DRAWING OR EXTRUDING NONFERROUS METALS**
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 493, EMPLOYMENT CONTRACTOR – TEMPORARY HARDWARE MFG.
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 495, EMPLOYMENT CONTRACTOR – TEMPORARY AUTOMOBILE BODY MFG.
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 497, EMPLOYMENT CONTRACTOR – TEMPORARY ELECTRONIC COMPONENT MFG.
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).

Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?

Does the insured recruit and train its employees?

Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?

How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?

Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?

Can the insured change the employee assignments during the terms of the contracts?

Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?

Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?

Attach a blank (sample) contract.

Code 499, EMPLOYMENT CONTRACTOR – TEMPORARY BATTERY MFG.

For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.

Are employees provided on a temporary basis to solve the clients’ short term staffing needs?

List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).

Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?

Does the insured recruit and train its employees?

Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?

How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?

Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?

Can the insured change the employee assignments during the terms of the contracts?

Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?

Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?

Attach a blank (sample) contract.

Code 501, CEMENT MFG.

List, and provide the percentages for, the various raw materials being used.

List, by types and percentages, the items produced.

If insured operates a quarry, advise of the stone or mineral being quarried.

Does insured primarily manufacture Portland cement, which sets and hardens by reacting chemically with water?

Code 502, PLASTER STATUARY MFG.

List, and provide the percentages for, the various raw materials being used.

List, by types and percentages, the items produced.

Code 506, POWDER METAL PRODUCTS MFG.

List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• Describe the manufacturing process in a step by step narrative.

**Code 507, GRAPHITE PRODUCTS MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• Provide the percentages of synthetic versus natural graphite being used to create the products.
• Does insured actually make a graphite product or does it merely crush, grind and screen natural graphite?

**Code 509, ASBESTOS GOODS MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• Describe manufacturing process in a step by step narrative.
• Does insured use asbestos fibers in the manufacturing process?

**Code 511, CONCRETE PRODUCTS MANUFACTURING**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• If insured performs construction or field erection work, provide the overall business percentages for mfg. versus field work.
• Ask the stock questions for construction operations.
• Are there separate crews for mfg. versus field/construction work?
• Are the concrete products manufactured at the job sites or at a permanently situated plant?

**Code 512, BRICK MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• For how long, and to what temperature, are the products fired?
• What is the percentage of free silica content in the products?
• Does insured manufacture any refractory products such as bricks that line furnace walls (made from fire clay, alumina dioxide and crushed refractory materials)?

**Code 513, POTTERY**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• Do the raw materials contain free silica?
• Does insured primarily manufacture ceramic capacitors (less than 1 H.P.)?
• Does insured primarily operate a ceramic shop, as described in the Rulings & Interpretations Entry for “Ceramic Shops” in Section 5 of the Manual?

**Code 514, REFRACTORY PRODUCT MFG.**
• List, and provide the percentages for, the various raw materials being used.
• List, by types and percentages, the items produced.
• What is the percentage of the silica content in the products?

**Codes 520 THROUGH 529 (TEMPORARY STAFFING GROUPED CLASSIFICATIONS)**
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note - there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?

How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?

Who determine which individual employees will be assigned to the clients - the insured or the insured’s clients?

Can the insured change the employee assignments during the terms of the contracts?

Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?

Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?

Attach a blank (sample) contract.

**Code 535, GLASS OR GLASSWARE MFG.**

List, and provide the percentages for, the various raw materials being used.

List, by types and percentages, the items produced.

Does insured primarily manufacture light bulbs or similar products such as TV or electron tubes?

Does insured primarily mfg. optical lenses?

**Code 536, GLASS PRODUCTS MFG.**

List, and provide the percentages for, the various raw materials being used.

List, by types and percentages, the items produced.

Is insured primarily a glass dealer who cuts glass to size?

If insured has multiple exposures involving glass sales (including cutting, beveling, bending, grinding etc.), the installation of glass, installation of auto glass and the shop or field repairing of glass &/or screen doors and windows etc., provide the overall business percentages for each of those exposures (separate shop versus field percentages as needed).

Does the insured install plate glass into a pre-existing frame at the job site or does insured install a window or door unit, where the glass is already in a frame (if both, provide percentages for each)?

Are there separate crews for shop versus field versus auto glass installation?

Is the auto glass installation performed in a physically separate work area?

**Code 544, MANUFACTURING OR LIGHT INDUSTRIAL OPERATIONS**

*Discontinued in Pennsylvania effective 12/1/10; still in effect for Delaware*

Are employees provided on a temporary basis to solve the clients’ short term staffing needs?

List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).

Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?

Does the insured recruit and train its employees?

Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?

How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?

Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?

Can the insured change the employee assignments during the terms of the contracts?

Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?

Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?

Attach a blank (sample) contract.
Code 551, CHEMICAL MFG.
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- If possible, advise how the products are used by the customers (in other words, what are the purposes of the products?).
- If applicable, provide the technical name for the chemical reaction that takes place during the mfg. process and note how the reaction alters the materials.
- If heat is applied during the mfg. process, to what temperature are the materials heated and for what duration of time?

Code 553, GASES MFG.
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- If possible, advise how the products are used by the customers (in other words, what are the purposes of the products?).
- If applicable, provide the technical name for the chemical reaction that takes place during the mfg. process and note how the reaction alters the materials.
- If heat is applied during the mfg. process, to what temperature are the materials heated and for what duration of time?

Code 555, DRUG OR MEDICINE MFG.
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- If possible, advise how the products are used by the customers (in other words, what are the purposes of the products?).
- If applicable, provide the technical name for the chemical reaction that takes place during the mfg. process and note how the reaction alters the materials.
- If heat is applied during the mfg. process, to what temperature are the materials heated and for what duration of time?

Code 563, PAINT MFG.
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- If possible, advise how the products are used by the customers (in other words, what are the purposes of the products?).
- If applicable, provide the technical name for the chemical reaction that takes place during the mfg. process and note how the reaction alters the materials.
- If heat is applied during the mfg. process, to what temperature are the materials heated and for what duration of time?
Code 571, SOAP MFG.
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- If possible, advise how the products are used by the customers (in other words, what are the purposes of the products?).
- If applicable, provide the technical name for the chemical reaction that takes place during the mfg. process and note how the reaction alters the materials.
- If heat is applied during the mfg. process, to what temperature are the materials heated and for what duration of time?

Code 573, FERTILIZER MFG.
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- If possible, advise how the products are used by the customers (in other words, what are the purposes of the products?).
- If applicable, provide the technical name for the chemical reaction that takes place during the mfg. process and note how the reaction alters the materials.
- If heat is applied during the mfg. process, to what temperature are the materials heated and for what duration of time?
- Does the employer apply fertilizer or spread lime at customer locations?

Code 581, OIL REFINING
- List, and provide the percentages for, the various raw materials being used.
- List, by types and percentages, the items produced.
- If possible, advise how the products are used by the customers (in other words, what are the purposes of the products?).
- If applicable, provide the technical name for the chemical reaction that takes place during the mfg. process and note how the reaction alters the materials.
- If heat is applied during the mfg. process, to what temperature are the materials heated and for what duration of time?
- Are the products petrochemical, primarily made from natural gas or petroleum?
- Does the insured also operate an oil or gas pipeline?

Code 587, EMPLOYMENT CONTRACTOR – TEMPORARY PAINT OR COLORS MFG.
- For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does the insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does the insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.
**Code 601, ROAD CONSTRUCTION**
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- Is the insured engaged in the paving and/or re-paving of streets and roads?
- If the paving work includes the laying of a sub-base, briefly describe that exposure.
- Is the insured engaged in airport runway, landing strip and/or warming apron construction?
- If the insured is engaged in scraping of existing streets/roads, describe that exposure.
- Is the scraping work exclusively performed in conjunction with the insured’s street/road construction or does the insured have jobs at which only street/road scraping work is provided?
- Is the insured principally engaged in painting lines on streets and roads and/or asphalt road spraying?
- Does the insured erect fences and highway barriers along roadways and is this work performed in conjunction with the insured’s road construction?
- Is the insured providing traffic control flagmen to unrelated concerns?
- Describe some recently completed jobs and those currently underway.
- Does the insured operate an asphalt plant? If yes, is the asphalt plant permanently sited (or is this a portable plant)? If it is permanently sited, is it operated by separate staff?

**Code 603, SEWER CONSTRUCTION**
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- If the insured engages in sewer and/or storm drain construction, describe the systems built by the insured.
- Does the insured construct main/truck lines, laterals and/or house connections from laterals?
- Describe the sewer/storm drain construction operations from beginning to end.
- Describe any tunneling work performed in conjunction with the sewer/storm drain construction?
- How often does the insured perform tunneling?
- Describe some recently completed jobs and those currently underway.

**Code 605, RAILROAD CONSTRUCTION**
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- If the insured engages in railroad construction, describe this work.
- Is the insured engaged in the repairing and/or replacing of railroad tracks?
- Is the insured operating as a railroad maintenance/right of way contractor that repairs/replaces worn ties and rails, clearing weeds/brush from the right-of-way, repairing fences, digging small drainage ditches, etc.
- Describe some recently completed jobs and those currently underway.

**Code 606, OIL OR GAS WELL DRILLING – ROTARY (PA only)**
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- If the insured engages in oil and/or gas well drilling by rotary method, describe this work.
- Describe any drilling of oil/gas wells by methods other than rotary drilling performed by this insured.
- Include the make and model number of each drilling unit in the listing of the insured’s machinery, tools and equipment.
- What percentage of the insured’s drilling is completed by rotary method versus non-rotary method?
- Describe some recently completed jobs and those currently underway.

**Code 607, DRILLING**
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- If the insured engages in oil and/or gas well drilling by rotary method, describe this work.
- Describe any drilling of oil/gas wells by methods other than rotary drilling performed by this insured.
- Include the make and model number of each drilling unit in the listing of the insured’s machinery, tools and equipment.
- What percentage of the insured’s drilling is completed by rotary method versus non-rotary method?
- If the insured provides services for oil and/or gas wells owned by unrelated concerns, list and describe the work (i.e. maintenance, cleaning, fracturing, etc.) performed on the wells owned by others.
• If the employer is an oil and/or gas well service provider, particularly note and describe any services performed in the well bore. Also note what percentage of the employer’s total revenue is attributable to services in the well bore versus other services.
• If the insured engages in the drilling or boring for soil samples, describe those services.
• If the employer performs horizontal/directional drilling, describe this process and note the kinds of pipe, conduit or cable installed using this method.
• Does the employer install pipes via microtunneling? If yes, does the employer use a computer navigated system operated above ground? Will this system advance and steer a microtunneling machine that jacks the pipe and excavates the soil to directly install pipes? Note the kinds of pipes installed using this method.
• Describe some recently completed jobs and those currently underway.

Code 608, FLAT CEMENT WORK
In addition to the questions below the field representative should check the description of Code 654 in Section 2 of the PCRB’s Manual. The questions below are modeled thereon. Also, the Code 608 and Code 654 standard survey questions are identical. Not all of the questions below will be pertinent for each and every employer, but all potential questions are listed for the field representative’s benefit.

• Does the employer perform concrete work in the construction of buildings?
• When describing either recently completed jobs or jobs presently underway please give examples of the types of structures the employer performs concrete work for (e.g., homes, apartment houses, offices, stores, swimming pools, warehouses, parking garages, piers, silos, dams or manufacturing plants). For each example cited please indicate how many stories the structure was built to.
• Does the concrete work include ground supported work such as concrete footings, foundation walls, cellar floors, curbs, sidewalks or driveways?
• Does the employer break up or remove old ground supported concrete (e.g., sidewalks, or driveways)? Please note, the driveway may be asphalt. If yes, please separately describe the break up work and specifically note if mechanical earth moving equipment us used.
• Does the concrete work include non-ground supported work such as self-bearing floors?
• Please specify how the concrete is reinforced: by mesh or rebar (short for reinforcing bars or rods).
• Is the setting of reinforcing bars or rods a part of the employer’s concrete work, or is the setting of reinforcing bars or roads for unrelated businesses to the employer’s business?
• How thick is the typical concrete pour for each type of concrete work?
• What part of the employer’s carpentry work involves the setting up or taking down (stripping) of forms for the employer’s concrete work?
• In the event the employer also performs carpentry work that is not related to setting up or stripping forms for concrete work, please use a separate paragraph to describe it.
• Does the employer install precast concrete panels or walls?
• Does the employer perform the asphalt paving of parking lots, driveways, tennis courts, etc?
• Does the employer erect mausoleums and/or monuments in cemeteries?
• Does the employer have separate contracts to paint traffic lines on tennis courts, streets, roads or parking lots?
• Does the employer perform diamond core drilling within buildings?
• Does the employer perform grouting (including drilling), which is the placement of cement, plastic compounds or concrete or pumping of fly ash?
• Does the employer perform guniting (shotcrete installation)?
• Does the employer pour concrete into driven pilings?
• Does the employer perform the wrecking or demolition of any type of concrete structure?

Code 609, EXCAVATION
• Provide the overall revenue percentages for each type of job performed by the employer.
• Is the employer an excavation and/or grading contractor? If yes, list and describe the excavation and/or grading services typically performed.
• Does the employer perform land clearing work? If yes, provide a step-by-step description of each different type of land clearing project (ex. tree removal, clearing/removal of brush or stumps not incident to tree
removal for new or existing right of ways, tree pruning, spraying (except aerial tree spraying) or trimming including incident tree removal, and brush/weed control using chemicals dispensed from portable or mechanical ground spraying equipment).

- Is the employer a blasting contractor?
- Does the employer perform excavation work in conjunction with the construction of cross country gas/oil pipelines, or perform pipeline reclamation work? If yes, describe this work.
- Does the employer operate a landfill? If yes, does the employer also provide garbage/rubbish collection services (or is the employer limited to operating a landfill)? If the employer also provides garbage/rubbish collection services, what percentage of the garbage/rubbish deposited in the employer’s landfill is collected by the employer?
- Does the employer construct levees? If yes, briefly describe this work.
- Does the employer deliver and set concrete burial vaults? If yes, are the vaults set into pre-dug graves, or does the employer perform grave digging? If the employer does perform grave digging, is this done by separate staff?
- Does the employer perform excavation to set concrete septic tanks into the ground? If yes, does the employer also hook up the septic systems to the customer’s building? If yes, does the employer use separate staff to perform the hook-up work?
- Does the employer perform subsurface road construction work, such as clearing the right of way, earth/rock excavating, filling and/or grading? If yes, describe all road construction work performed.
- Does the employer’s road construction work include the laying of the road sub-base?
- Does the employer construct access roads (e.g., for the logging industry)?
- Does the employer construct bridges and/or culverts in conjunction with their street and road construction work? If yes, describe the bridge and/or culvert construction work.
- Does the clearance of the bridges or culverts that the employer constructs exceed 10 feet at any point? Does the entire distance between the terminal abutments exceed 20 feet?
- Describe jobs recently completed or currently underway.
- List the equipment, tools and machinery used in the excavation and grading work.

**Code 611, PILE DRIVING**
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- If the insured engages in pile driving in connection with building foundation construction, describe this work.
- For what types of customers are the pile driving services typically performed?
- Is the insured engaged in bulk head, jetty and/or wharf construction?
- Provide a representative listing of work recently completed or currently underway.

**Code 615, TUNNELING**
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- If the insured engages in tunneling, describe that work.
- If the insured engages in cofferdam construction, describe that work.
- If the insured engages in shaft sinking, describe that work.
- For what types of customers are the insured’s services typically provided?
- Describe some recently completed jobs and those currently underway.
- Does the employer install pipes via microtunneling? If so, does the employer use a computer navigated system operated above ground? Will this system advance and steer a microtunneling machine that jacks the pipe and excavates the soil to directly install pipes? Note the kinds of pipe installed using this method.

**Code 617, GAS, STEAM OR WATER MAIN CONSTRUCTION**
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- If the insured engages in gas, steam and/or water main construction, describe the systems typically constructed by the insured.
- Describe the gas/steam/water main construction operations from beginning to end.
- If the insured engages in conduit construction, describe that work.
- Does the insured’s conduit construction include cable installation in the conduits?
• Describe some recently completed jobs and those currently underway.
• Does the insured install cable?
• If so, what kinds of cable are installed?
• Fully describe the ways in which cable is installed.
• Is it installed above or below ground?
• Is it installed within buildings?
• List equipment used in the cable installation process

**CODE 625, CONDUIT CONSTRUCTION (DE only)**
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• If the insured engages in gas, steam and/or water main construction, describe the systems typically constructed by the insured.
• Describe the gas/steam/water main construction operations from beginning to end.
• If the insured engages in conduit construction, describe that work.
• Does the insured’s conduit construction include cable installation in the conduits?
• Describe some recently completed jobs and those currently underway.

**Code 643, ASBESTOS CONTRACTOR (DE only)**
• Does insured primarily perform the encapsulation or removal of asbestos?
• Provide the overall business percentages, by income, for the various types of jobs being performed.

**Code 645, WALLBOARD INSTALLATION**
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Does the insured install wallboard?
• Does the insured install any other materials such as sheetrock or plasterboard?
• Does the insured perform any painting or other finishing work after wallboard is installed?
• Does the insured install any metal framework within buildings?
• Does the insured perform any other construction/carpentry work at the same job site?

**Code 646, FURNITURE OR FIXTURES INSTALLATION**
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Does the insured install shelving and/or partitions in a store or office?
• Does the insured install fixtures at a store and/or office location?
• If the insured performs any installation work of kitchen equipment, note what types of equipment is installed, including appliances.
• If the insured performs any other construction/carpentry work at the same job site, describe.
• If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work note if there are separate crews and fully describe the shop operation.

**Code 647, INSULATION WORK**
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Describe all insulation work performed by the insured.
• Is the insured involved in any weatherization projects for unrelated concerns?
• Describe any other construction/carpentry work being performed at the same job site.

**Code 648, CARPENTRY – INSTALLATION OF CABINET WORK**
• Provide the overall business percentages, by income, for the various types of jobs being performed (ex. cabinet, vanity, countertops, interior trim and wooden flooring laying versus general remodeling or construction jobs involving more than just those operations).
• Does the insured install cabinetry and/or countertops?
• Describe any other flooring installation work being performed.
• Describe any trim work being performed by the insured.
• Describe any other construction/carpentry work being performed at the same job site.
• If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work, note if there are separate crews and fully describe the shop operation.

Code 649, CEILING INSTALLATION
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• What types of ceilings are being installed by the insured?
• Does the insured also perform insulation work?
• Describe any other construction/carpentry work being performed at the same job site.

Code 651, CARPENTRY – COMMERCIAL
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Provide the overall business percentages, by income, for commercial versus residential jobs.
• What types of carpentry work does the insured perform?
• Describe any other construction/carpentry work being performed at the same job site.
• If the insured performs manufacturing, in shop, provide the overall business percentages for shop versus field work, note if there are separate crews and fully describe the shop operation.
• Describe some recently completed jobs and those currently underway.

Code 652, CARPENTRY - RESIDENTIAL
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Does the insured perform work at commercial or residential locations?
• What types of carpentry work does the insured perform?
• If the insured performs multiple carpentry/construction tasks at a singular job site, does the insured maintain a separate crew for each operation, or will all employees interchange among the various tasks?
• If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work note if there are separate crews and fully describe the shop operation.
• Describe some recently completed jobs and those currently underway.

Code 653, MASONRY
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Does the insured perform any brick or block work?
• Does the insured perform any cleaning or other work to building exteriors?
• Is all cement or concrete work performed in conjunction with the insured’s brick and block work, or will the insured also perform cement or concrete work at separate job locations?
• Does the insured perform any other construction/carpentry work at the same job site?
• Describe some recently completed jobs and those currently underway.

Code 654, CONCRETE CONSTRUCTION
In addition to the questions below the field representative should check the description of Code 608 in Section 2 of the PCRB’s Manual. The questions below are modeled thereon. Also, the Code 608 and Code 654 standard survey questions are identical. Not all of the questions below will be pertinent for each and every employer, but all potential questions are listed for the field representative’s benefit.
• Does the employer perform concrete work in the construction of buildings?
• When describing either recently completed jobs or jobs presently underway please give examples of the types of structures the employer performs concrete work for (e.g., homes, apartment houses, offices, stores, swimming pools, warehouses, parking garages, piers, silos, dams or manufacturing plants). For each example cited please indicate how many stories the structure was built to.
• Does the concrete work include ground supported work such as concrete footings, foundation walls, cellar floors, curbs, sidewalks or driveways?
• Does the employer break up or remove old ground supported concrete (e.g., sidewalks, or driveways)? Please note, the driveway may be asphalt. If yes, please separately describe the break up work.
• Does the concrete work include non-ground supported work such as self-bearing floors?
• Please specify how the concrete is reinforced: by mesh or rebar (short for reinforcing bars or rods).
• Is the setting of reinforcing bars or rods a part of the employer’s concrete work, or is the setting of reinforcing bars or roads for unrelated businesses to the employer’s business?
• How thick is the typical concrete pour for each type of concrete work?
• What part of the employer’s carpentry work involves the setting up or taking down (stripping) of forms for the employer’s concrete work?
• In the event the employer also performs carpentry work that is not related to setting up or stripping forms for concrete work, please use a separate paragraph to describe it.
• Does the employer install precast concrete panels or walls?
• Does the employer perform the asphalt paving of parking lots, driveways, tennis courts, etc?
• Does the employer erect mausoleums and/or monuments in cemeteries?
• Does the employer have separate contracts to paint traffic lines on tennis courts, streets, roads or parking lots?
• Does the employer perform diamond core drilling within buildings?
• Does the employer perform grouting (including drilling), which is the placement of cement, plastic compounds or concrete or pumping of fly ash?
• Does the employer perform guniting (shotcrete installation)?
• Does the employer pour concrete into driven pilings?
• Does the employer perform the wrecking or demolition of any type of concrete structure?

**Code 655, IRON ERECTION**

• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Does the insured install structural steel?
• If the insured is involved in the building of pre-fabricated metal buildings, will it install the framework only, or will it also install other parts or sections?
• Does insured erect pre-stressed concrete?
• If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work, note if there are separate crews and fully describe the shop operation.
• Describe some recently completed jobs and those currently underway.

**Code 656, ELECTRIC LINE CONSTRUCTION**

• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Does the insured install telephone or electric lines? describe the operations fully.
• Does the insured install any steel towers used for stringing lines?
• Does the insured provide services as a contractor to utility or other unrelated concerns?
• Does the insured install cable?
• If so, what kinds of cable are installed?
• Fully describe the ways in which cable is installed.
• Is it installed above or below ground?
• Is it installed within buildings?
• List equipment used in the cable installation process

**Code 657, RIGGING**

• Describe a typical rigging job.
• What percentage of the rigging work is provided to unrelated concerns as a contract service (versus rigging performed in conjunction with and in order to facilitate any construction or erection operations that the insured conducts)?
• Is the employer focused to or principally engaged in a specific type of rigging operation, such as the installation of tower bells, the erection and or dismantling of oil rigs or derricks, or safe moving? If so, please identify.
• Does the employer operate mobile cranes? If yes, is this done to achieve their own rigging work (or is the employer’s business simply the rental of cranes with operators with no rigging)?
Does the employer perform machinery or equipment installation in addition to rigging? For example, after the employer will rig and set in place a piece of machinery or equipment, will the employer then also install it by making plumbing, wiring or other mechanical connections? If yes, describe this work.

On what percentage of the employer’s rigging jobs will the employer also perform subsequent installation work? Is the rigging and installation work typically performed by separate crews of employees?

Does the employer perform the over the road transportation of the items that they rig i.e., is the item rigged and loaded onto a truck and transported to a different location for setting in place (as opposed to moving rigged items around the same general work site)? Is the transportation limited to the items they rig (or does the employer provide contract trucking services unrelated to rigging)? If both, provide percentages.

Code 658, IRON ERECTION
- Provide the overall business percentages, by income, for the various types of jobs being performed (distinguish between structural versus non-structural steel erection).
- If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work, note if there are separate crews and fully describe the shop operation.
- Describe some recently completed jobs and those currently underway.

Code 659, ROOFING
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- Does insured install/replace roofs as separate jobs, or is this work usually done in connection with general remodeling/construction operations?
- If the insured performs any sheet metal installation, is this work performed in conjunction with the insured’s roofing operation, or as separate and distinct job sites only?
- If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work note if there are separate crews and fully describe the shop operation.
- Describe some recently completed jobs and those currently underway.

Code 660, ALARM OR SOUND SYSTEM
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- Provide the overall business percentages, by income, for each type of installation or service operation performed by the insured.
- Separately describe a “typical” installation and a “typical” service or repair job for each type of project being performed (ex. alarm systems versus inter-communication systems).
- Provide the overall business percentages, by income, for residential versus commercial work.
- Does the insured install any telephone systems for unrelated concerns? If so, is the insured only involved in the installation of the apparatus (identify the types of apparatus installed - e.g., a PBX), or will the insured also install any wiring and/or cable, within buildings?
- Distinguish between work done on electrical versus gas major household appliances.
- If insured services or repairs water coolers, what percentage of the business is derived from this operation (will the insured simply hook up the water cooler to an existing line or will a line be run)?
- If insured installs, repairs, or services stereo or sound systems (e.g., movie theaters, rock concerts), provide a percentage of this insured’s business that is derived from this operation and note if this work includes performing any wiring.
- If insured also performs electrical wiring contracts inside of buildings/structures or any other construction/installation work, provide the overall business percentage for these jobs and describe them.
- If insured sells merchandise from a showroom at this location, ask the standard questions for the type of store being operated and provide the overall business percentages for servicing versus sales and provide percentages of merchandise serviced/repaired that is sold by this insured versus merchandise services/repaired that is sold by others.
- If insured also provides security guard staff and/or operates an investigative agency, specify if there are separate crews for each exposure and ask the standard questions for Code 904, Investigative Agency, and Code 954, Security Agency.
• Does the insured hookup customers for cable television service under contract to an unrelated cable television provider? If yes, provide a full description of how this work is performed.

**Code 661, ELECTRICAL WIRING BUILDINGS**

• Provide the overall business percentages, by income, for the various types of jobs being performed.
• If the insured performs any cable laying, describe the process and note if any of the cable work is performed in existing conduit.
• Describe all electrical work performed by the insured.
• Does the insured perform all work within buildings?
• Does the insured perform any commercials appliance installation or repair?
• Does the insured install cable?
• If so, what kinds of cable are installed?
• Fully describe the ways in which cable is installed.
• Is it installed above or below ground?
• Is it installed within buildings?
• Does the insured install or service solar electric panels and/or systems (photovoltaic systems)?
• List equipment used in the cable installation process.

**Code 662, APPLIANCE – SERVICE OR REPAIR**

• Provide the overall business percentages, by income, for the various types of jobs being performed.
• What types of appliances are being installed, serviced or repaired (and specify which are commercial and which are residential appliances)?
• If laundry equipment is being installed, serviced or repaired, note the per-load capacity of the different types of laundry units.
• Does the insured perform any electrical or plumbing connection work in conjunction with the appliance installation?
• Is the insured primarily engaged in renting/leasing/servicing coin-operated washers and dryers for such customers as apartment buildings, dorms, etc.?
• Does the insured operate a store where appliances are sold and is the store separately staffed?

**Code 663, PLUMBING**

• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Is all pipefitting work performed within buildings?
• Describe any piping connection(s) made outside buildings.
• Does the insured perform pipefitting work for industrial equipment or other machinery?
• Provide the overall business percentages, by income, for the installation and/or repair of forced air versus hot water or steam HVAC systems.
• If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work, note if there are separate crews and fully describe the shop operation.

**Code 664, HEATING, VENTILATING OR AIR CONDITIONING CONTRACTOR**

• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Does the insured install any ventilating or air conditioning equipment?
• Provide the overall business percentages, by income, for the installation and/or repair of forced air versus hot water or steam HVAC systems and plumbing work.
• Does the insured operate a fabrication shop? If yes, provide the types of items fabricated in the shop by percentage.
• List the raw materials used in the fabrication effort by size and dimension, and provide percentages for each raw material used.

**Code 665, PAINTING**

• Provide the overall business percentages, by income, for the various types of jobs being performed (ex. painting versus paperhanging).
• Does insured paint tanks or bridges?
Code 666, PLATE GLASS INSTALLATION
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- Does the insured install any glass products?
- If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work note if there are separate crews and fully describe the shop operation.
- Does the insured operate a shop where the insured manufactures any of the glass products or performs bending, beveling, grinding or silvering of glass?
- Is the shop operation separately staffed?
- Will the insured install windows as a unit, or will the insured install the aluminum framing and glass separately?
- Does the insured operate a separately staffed store (if “yes”, ask the standard store questions)?

Code 667, PAPER HANGING
- Provide the overall business percentages, by income, for the various types of jobs being performed (ex. paperhanging versus painting).

Code 668, TILE, STONE, MOSAIC OR TERRAZZO WORK
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- If the insured installs ceramic tile or marble installation, describe.
- Does the insured install any stone (specify structural versus non-structural)?
- Does the insured perform any concrete, brick or block work in conjunction with any of the other installation operations?

Code 669, PLASTERING
- Provide the overall business percentages, by income, for the various types of jobs being performed. 
- Provide the overall business percentages, by income, for interior versus exterior work.
- Describe some recently completed jobs and those currently underway.

Code 670, HOUSE FURNISHINGS INSTALLATION
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- What types of household furnishings are being installed, serviced or repaired?
- What, if any, types of floor coverings does the insured install?
- Does the insured perform any upholstering work and is this work performed in the insured’s shop only?
- Does the insured operate a separately staffed store where wallpaper, rugs, household furnishings are sold?
- If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work note if there are separate crews and fully describe the shop operation.

Code 673, ADVERTISING SIGN
- If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field installation/repair work note if there are separate crews and fully describe the shop operation.
- Does the insured manufacture signs?
- Provide a step-by-step description of the manufacturing process.
- List the raw materials used in the manufacturing operations by size and dimension.
- Describe the insured’s typical customer.
- Provide copies of brochures or other printed materials illustrating the insured’s products.
- Does the insured also install or erect the signs? If yes, provide a step-by-step description of the installation/erection process.

Code 674, SWIMMING POOL CONSTRUCTION
- Provide the overall business percentages, by income, for the various types of jobs being performed.
- What percentage of the insured’s pools are constructed from iron or steel (specify how they are installed)?
- If the insured provides swimming pool cleaning or maintenance services, describe those services.
• Do the insured’s employees interchange between the swimming pool construction and the swimming pool cleaning or maintenance services, or are separate crews used?
• Provide the percentage of the insured’s total revenue that is attributable to the construction work versus the cleaning or maintenance services.

**Code 675, MACHINERY OR EQUIPMENT ERECTION OR REPAIR**
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Provide a representative listing of the types of machinery or equipment installed, serviced or repaired by the insured and describe the intended use of that machinery or equipment.
• Describe the insured’s typical client.
• If the insured performs manufacturing or performs servicing/repair work in shop, provide the overall business percentages for shop versus field work, note if there are separate crews and fully describe the shop operation.
• Will the insured move/rig equipment? Describe.

**Code 676, SHEET METAL INSTALLATION**
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• List, and provide the overall business percentages for, the various types of items fabricated and/or installed by percentage.
• Does the insured operate a fabrication shop? If yes, provide the types of items fabricated by percentage.
• List the raw materials (size and dimension) used in the shop fabrication operations (if applicable).
• Does the insured also perform roofing work? If yes, describe.
• What percentage of the insured’s sheet metal products installation work is performed in conjunction with the roofing jobs (versus sheet metal installation performed at separate and distinct job sites)?
• Describe some recently completed jobs and those currently underway.

**Code 677, BOILER INSTALLATION**
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Provide the typical BTU capacity of the boilers installed and repaired by the insured (if this varies, provide a range).
• What percentage of the boilers installed or repaired by the insured are used in residential versus commercial, industrial or institutional capacities?
• Does the insured perform any brick installation or repair in connection with their boiler work?

**Code 679, ADVERTISING COMPANY, OUTDOOR**
• If the insured performs manufacturing in shop, provide the overall business percentages for shop versus field work note if there are separate crews and fully describe the shop operation.
• Is the insured engaged in erecting or maintaining billboards, or changing the advertising on billboards? If yes, provide step-by-step descriptions of those operations.
• Does the insured paint signs or lettering on buildings, structures or vehicles?
• Does the insured perform billposting?

**Code 681, CANVAS GOODS ERECTION**
• Provide the overall business percentages, by income, for the various types of jobs being performed.
• Describe the erection or removal of canvas or cloth item through a step-by-step description of the installation, erection or removal process.
• Provide a representative listing (with percentages) of the various items installed, erected or removed.

**Code 682, EMPLOYMENT CONTRACTOR – TEMPORARY LABOR**
(Discontinued in Pennsylvania effective 12/1/10; still in effect for Delaware)
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured's clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured's clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.
• List the trades involved.

Code 691, EMPLOYMENT CONTRACTOR – TEMPORARY EXCAVATION
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured's clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured's clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured's clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.
• List the construction trades involved

Code 693, EMPLOYMENT CONTRACTOR – TEMPORARY COMMERCIAL CARPENTRY
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured's clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.
• List the trades involved.

**Code 695, EMPLOYMENT CONTRACTOR – TEMPORARY ELECTRICAL WIRING**
- For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.
- List the trades involved.

**WRECKING OR DEMOLITION OR BUILDING MOVING OR RAISING PROJECT**
- Does the insured perform wrecking or demolition work? If yes, provide a description of that work.
- Note which of the following types of structures the insured will demolish:
  a) Wooden structures (including residential structures and any interior gutting)
  b) Concrete or concrete encased structures
  c) Iron or steel structures
  d) Masonry structures
  e) Piers or wharves
- Does the insured operate a secondhand material yard?
- Is the secondhand material yard operated at a permanent location, or does the insured operate temporary yards at their wrecking/demolition sites?
- Does a separate crew of employees staff the secondhand material yard?

**Code 709, TALLYMEN AND CHECKING CLERKS**
- If the insured employs tallymen and/or checking clerks, describe the duties of those employees in detail.
- Provide a representative listing of the types of commodities involved.
- Note the size and types of vessels involved.
- Does the insured also perform stevedoring work or operate a steamship line, or are the tallymen and/or checking clerk services provided on a contract basis?
- If the insured does perform stevedoring work, provide a detailed description of those operations.
- Advise which body of water the insured’s operations are conducted on or adjacent to.
Code 716, MARINA
• If the insured operates a marina, note where it is located (at what body of water) and describe.
• Provide the percentage of the insured’s revenue that is attributable to boat docking or storage fees, boat repair and boat sales.
• Describe any service and maintenance work performed on recreational boats docked at the marina?
• If the insured is principally engaged in boat sales, is that operation conducted on or adjacent to a body of water or is it conducted inland?
• Advise the types of vessels involved and note their maximum size/length.
• Note all other amenities offered by the marina such as other recreational facilities, restaurants or hotels and note for which services the insured engages separate crews.

Code 718, BOAT BUILDING OR REPAIR
• If the insured is engaged in boat building or repair work, provide a detailed description of that work.
• Advise the types of boats constructed or repaired (e.g., yachts, motor boats, sailboats, etc.).
• List by size and dimension, and provide the percentages for, the raw materials used.
• Provide the maximum length of the boats constructed or repaired by the insured.
• Advise if the insured has been exempted from the U. S. L. & H. Act by the Secretary of Labor and, if available, obtain a copy of the exception.

Code 721, RAILROAD OPERATION
• If the insured operates a railroad, describe in detail.
• Is this an intrastate or an interstate railroad?
• Describe any railroad maintenance and repair work being performed.
• Is the railroad maintenance and repair work performed on a contract basis, or only on the railroad(s) owned/operated by the insured?

Code 744, AIRCRAFT MANUFACTURE
• If the insured manufactures aircraft, provide a step-by-step description of the manufacturing process.
• List, by size and dimension, and provide percentages for, the raw materials used.
• If the insured operates any aircraft, describe.
• Is the aircraft operated for the purposes of transporting the insured’s own employees in the course of their work duties, or does the insured provide contract aircraft services?
• If the insured provides contract aircraft services, specify the type (e.g., commuter air carriers, skywriting, student instruction, etc.)

Code 751, GAS UTILITY
• Is the insured a utility supplying natural gas to customers?
• Does the operation include geophysical exploration, drilling for gas deposits, the operation of gas wells and/or the construction or operation of cross-country pipelines?
• Does the insured employ staff exclusively engaged as meter readers (and who have no other regular duties)?

Code 752, OIL OR GAS PIPELINE OPERATION
• Does insured also construct and/or operate wells or perform oil refining?

Code 753, WATERWORKS
• Is the insured a utility supplying water to customers?
• Does the insured operate a sewage or waste water treatment plant? If yes, describe the sewage or waste water treatment effort.
• Is the facility operated by a municipality (or is it operated by a municipal authority or a private entity)?
• If the waterworks or sewage treatment plant is insured on a Municipality policy, is there a separate municipal authority for the waterworks or sewage treatment plant?
• Does the insured employ staff exclusively engaged as meter readers (and who have no other regular duties)?

**Code 755, Electric Utilities**
• Is the insured a utility providing electrical service to customers?
• Does insured operate a trash-to-steam plant, which generates electricity from the steam created in the incinerating of trash?
• Does the insured employ staff exclusively engaged as meter readers (and who have no other regular duties)?

**Code 757, Telecommunications Company**
• Is the insured licensed by the FCC to operate as a telecommunications firm?
• Does insured operate separately staffed and located stores selling phones or other communications equipment to the general public?

**Code 759, Cable Television Operations**
• Does insured operate a separately staffed broadcasting studio or engage crews to film and/or present news and/or sporting events?
• Does insured erect towers?
• Does the insured install cable?
• If so, what kinds of cable are installed?
• Fully describe the ways in which cable is installed.
• Is it installed above or below ground?
• Is it installed within buildings?
• List equipment used in the cable installation process.

**Code 801, Stable**
• Are horses raised for the insured's personal use only or is this a commercial venture?

**Code 802, Crane Rental With Operator**
• Does the employer rent cranes with operators?
• Does the employer rent cranes without operators?
• In the event the employer rents cranes with and without operators please secure the revenue percentage for crane rental with operator and crane rental without operator.
• Please list the cranes rented by their make and model number.
• Does the employer perform rigging work? If yes, what percentage of the crane rental jobs include rigging work performed by the employer?

**Code 803, Taxicab Company**
• Does insured primarily provide a transportation service for immediate hire (on a call and demand basis) with fares being determined by zone or meter?
• If insured provides more than one type of transportation service, provide the overall business percentages for each service and advise if each is provided by a separate, non-interchanging, crew.
• If insured repairs its own vehicles and also repairs vehicles for unrelated customers, provide the overall business percentages for each of those two services.

**Code 804, School Bus Operation**
• If insured provides more than one type of transportation service, provide the overall business percentages for each service and advise if each is provided by a separate, non-interchanging, crew.
• If insured repairs its own vehicles and also repairs vehicles for unrelated customers, provide the overall business percentages for each of those two services.

**Code 805, Milk Hauling**
• Is insured a contractor exclusively hauling unprocessed or processed milk by tank truck?
- If insured provides more than one type of trucking/transportation service, provide the overall business percentages for each service and advise if each is provided by a separate, non-interchanging, crew.
- If insured repairs its own vehicles and also repairs vehicles for unrelated customers, provide the overall business percentages for each of those two services.

**Code 806, FURNITURE MOVING AND/OR STORAGE**
- Provide the overall business percentages for moving and storage operations versus other transportation services (specify what they are and provide a separate percentage figure for each) versus separate warehousing/storage operations not related to the moving and storage operation.
- If insured provides more than one type of transportation service, advise if each is provided by a separate, non-interchanging, crew.
- What percentage of the items being stored or warehoused are also transported by the insured?
- Is there separate transportation versus warehousing crews?
- Is insured primarily a contractor delivering or transporting furniture under contract for a manufacturer or store?
- Does insured offer a separate pre-packing service, using a separate crew?

**Code 807, AMBULANCE SERVICE**
- If insured provides more than one type of transportation service, provide the overall business percentages for each service and advise if each is provided by a separate, non-interchanging, crew.
- Is insured a volunteer fire or ambulance corps using paid employees to transport the ill or injured?
- If insured is a volunteer fire co. with paid employees, does the operation include a fire hall with a private social club or banquet hall (if "yes" ask the stock restaurant/club/catering questions)?
- Is this an ambulance company with both volunteer members and paid staff? If yes, provide the current number of volunteer members and the current number of paid staff.
- Is insured owned by a hospital and does it primarily transport the ill and injured to that or other related hospitals?
- Does insured operate advanced life support units which do not transport the victims of accidents, but who stabilize them at the accident scenes while awaiting the arrival of the ambulances?
- If insured repairs its own vehicles and also repairs vehicles for unrelated customers, provide the overall business percentages for each of those two services.

**Code 808, PARCEL DELIVERY**

There are three types of businesses assigned to Code 808: Parcel Delivery, Armored Motor Truck Delivery and Automobile Driveaway Service - For Transportation of Private Clients’ Cars. Most of the questions below are for businesses performing parcel delivery.

In the event an individual business performs two or all three types of services contemplated by this class, each type of service is to be described in a separate paragraph and employees are to be listed by type of service performed. Please indicate interchange of delivery personnel between the different services as warranted.

- Advise how the employer’s tariff charge is made: by the truckload, the cumulative weight of the packages or parcels being delivered, a flat rate for the consignment/shipment, by the number of stops the delivery truck makes per day, or is the charge made on each envelope, package or parcel?
- List the maximum weight of individual items and also provide the average weight of the total items delivered per stop. Provide the percentage of individual items (if any) over 150 pounds
- Does the employer construe his business as a messenger or courier service? If yes, then is the delivery accomplished by foot, bicycle or what type of vehicle?
- From the following please provide the number of over-the-road vehicles (power units only) used by the employer in each category:
  - Private passenger vehicle (a car)
  - Commercial licensed pickup truck
  - Minivans
  - Ford Econoline type vans
  - All other “lightweight” vehicles up to 10,000 pounds gross vehicle weight
• List by type and gross vehicle weight tractors to pull truck trailers and any other vehicle
• What are the business' typical pickup points and destinations?
• Please identify the employer's Federal Department of Transportation or Pennsylvania Public Utility Commission authority held (as warranted): common carrier, contract carrier, freight forwarder, freight broker.
• Please separately list delivery personnel as follows: drivers (by type of vehicle), by bicycle or by foot.
• Does the employer operate an armored motor truck delivery service?
• Does the employer operate an automobile driveaway service transporting private clients’ cars from one location to another (e.g., Pennsylvania to Florida)?
• If an auto driveaway service are the customers’ cars driven individually from the pickup point to the destination or will the employer load one or more customers’ cars onto a truck?
• If the business repairs its vehicles and also repairs vehicles owned and operated by unrelated businesses, provide a breakdown of the business/repair percentages for the employer’s vehicles in relation to the vehicles owned and operated by the unrelated businesses.
• Please also note whether the repair effort is separately staffed and located in a physically separate area and how the physical separation is accomplished.
• Does the employer operate any terminals or warehouses in Pennsylvania? If so, are the terminals/warehouses used primarily to consolidate (break down, re-palletize, re-wrap) and expedite shipments before delivery or are they primarily being used to warehouse materials/merchandise for the customers? For how long are the materials/merchandise normally held at the terminals/warehouses?

**Code 809, FUEL DISTRIBUTION**
• List, and provide percentages for, the various lines of merchandise.
• Does the insured own the merchandise that is hauled or delivered?
• If insured installs &/or services burners or heating, ventilating &/or air-conditioning systems, provide the overall business percentages for the sale of fuel versus the installation/servicing of hot water or steam systems versus the installation/servicing of forced air systems.
• If the insured operates gas stations &/or auto/truck repair garages &/or combination self-service gas stations and grocery stores, provide the overall business percentages for each portion of the operation and ask the stock questions for Code 815, Automobile Service Center, Code 816, Automobile Filling Station, and Code 917, Grocery Store.
• If a grocery store is being operated, provide the overall business percentages for the sale of self-service gas versus the sale of snack foods, beverages, tobacco products, candy and lottery tickets versus the sale of grocery items such as produce, canned and packaged goods, household items, frozen foods and airy products.
• Does insured primarily engage in the recovery or removal of used motor oil?
• Is insured primarily a welding equipment/supply dealer?

**Code 810, COAL TRUCKING**
• Does the insured haul coal (either prepared or unprepared)?
• If the insured provides more than one type of trucking transportation service or hauls different types of commodities (e.g., bulk commodities like coal, gravel, parcels, goods on pallets), break down overall business percentages for each service or type of commodity hauled. Also advise whether there is a separate dedicated driving staff for each type of transportation service.
• If the insured engages in both the hauling of coal and the hauling of other commodities, does the insured maintain separate payroll records for the hauling of coal versus the hauling of other commodities?
• Advise typical pick-up points and destinations (e.g., coal mines - either underground or surface, coal tipples).
• If this business extracts or mines the coal being hauled, note what part of the coal hauling is for coal extracted by the insured in relation to coal that was mined by unrelated coal mining businesses.
• If the business repairs its vehicles and also repairs vehicles owned and operated by unrelated businesses, provide a break down of the business/repair percentages for each service. Also note whether the repair effort is separately staffed and located in a physically separate area and how the physical separation is accomplished.
**Code 811, TRUCKING**

- Advise how the employer's tariff charge is made: by the truckload, the cumulative weight of the packages or parcels being delivered, a flat rate for the consignment/shipment, by the number of stops the delivery truck makes per day, or is the charge made on each envelope, package or parcel?
- Please identify the employer's Federal Department of Transportation or Pennsylvania Public Utility Commission authority held (as warranted): common carrier, contract carrier, freight forwarder, freight broker.
- Does the employer operate any terminals or warehouses in Pennsylvania? If so, are the terminals or warehouses used only to consolidate (break down, re-palletize, re-wrap) and expedite shipments before delivery?
- Is the terminal being used to warehouse materials/merchandise for the customers? For how long are the materials/merchandise normally held at the terminals/warehouses?
- If the terminal is used to consolidate and expedite shipments and to store the customers’ goods, please try to secure a revenue breakdown.
- What are the business' typical pickup points and destinations by the type of cargo hauled?
- List items hauled by type and percentage.
- Does the insured haul coal? If yes, please ask the Code 810 standard survey questions.
- Does the employer perform the delivery and setting into place of furniture or major appliances under contract for a manufacturer or a store?
- Does the employer haul the US mail under contract with the USPS?
- Does the employer haul potable water and/or liquid food products? If yes, please ask the standard Code 805 survey questions.
- Does the employer haul brine or water for gas well drilling or fracing?
- Does the employer haul bulk commodities such as stone, asphalt?
- Does the employer pack up and/or move and/or store household goods?
- Does the employer move pianos?
- Does the employer primarily haul its products or merchandise and/or does the employer perform backhauling?
- If the employer's business is construction and the employer also performs hauling for unrelated customers, is the hauling for the unrelated customers performed by a separate/dedicated driving crew? What part of the hauling is the employer’s construction hauling in related to contract hauling?
- If the business repairs its vehicles and also repairs vehicles owned and operated by unrelated businesses, provide a breakdown of the business/repair percentages for the employer’s vehicles in relation to the vehicles owned and operated by the unrelated businesses.
- From the following please provide the number of over-the-road vehicles (power units only) used by the employer in each category:
  - Private passenger vehicle (a car)
  - Commercial licensed pickup truck
  - Minivans
  - Ford Econoline type vans
  - All other "lightweight" vehicles up to 10,000 pounds gross vehicle weight
  - List by type and gross vehicle weight tractors to pull truck trailers (flat bed, box trailers, tankers) and any other vehicle

**Code 812, MAIL HAULING COMPANY**

- Is insured under contract with the U. S. Postal Service to haul or deliver mail, including letters, parcels, packages, sacks, pallets or rolling containers?
- If insured provides more than one type of transportation service, provide the overall business percentages for each service and advise if each is provided by a separate, non-interchanging, crew.

**Code 813, WAREHOUSING**
• If the insured performs both storage and hauling operation, provide the overall business percentages for each (and include separate percentages if more than one type of hauling exposure is present) and advise if each service is performed by a separate, non-interchanging, crew.
• If insured performs warehousing of items it doesn’t also transport, provide the percentages for storing of items insured also hauls versus storing of items transported by unrelated concerns.
• Are the insured’s contracts for storing or for delivering the goods?
• Specify if the goods are basically being received in the warehouse in order to be broken down, re-palletized and re-wrapped, before being delivered by this insured, or are they primarily being received because the customers’ need them to be warehoused?
• Are the terminals used only to consolidate and expedite shipments, with the delivering being how the insured’s revenue is generated?
• What’s the typical turnaround time (for how long are the items normally held at the insured’s warehouses/terminals)?
• Does insured offer a separate pre-packing service, using a separate crew?
• Does insured operate a document storage facility for the records of unrelated concerns?
• Does the insured perform warehousing of products it manufactures in our state or merchandise that it sells in our state (in other words, is the warehousing part of the PA manufacturing or sales operation)?

**Code 814, DEALER IN MOBILE, SELF-PROPELLED EQUIPMENT**
• List, and provide overall business percentages for, the sale/rental of each line of merchandise (distinguish between cars and trucks versus construction, farm and factory equipment).
• Provide the overall business percentages, by revenue, for the sale/rental/repairing of lawn mowers versus other gardening equipment (e.g., weed wackers) versus farm, construction and/or factory equipment.
• Provide the overall business percentages for sales/rentals versus servicing work versus the sale of parts.
• Is there a separate sales crew?

**Code 815, AUTOMOBILE SERVICE CENTER**
• Provide the overall business percentages for the repairing of vehicles versus the sale of gasoline (if there is more than one location, provide percentages on a per location basis).
• Does a separate crew, in a physically separate work area, perform tire recapping or retreading work?
• If insured also sells auto parts, advise of the percentage of parts used in the repairing operation versus parts sold to store customers and advise if there’s a separate crew and a physical separation for the parts store.
• If the insured operates combination gas stations, auto/truck repair garages & grocery stores, provide the overall business percentages for each portion of the operation and ask the stock questions for Code 815, Automobile Service Center, and Code 816, Automobile Filling Station and Code 917, Grocery Store, and note if there are separate crews and work areas for the various exposures.
• If a grocery store is being operated, provide the overall business percentages for the sale of self-service gas versus the repairing of vehicles versus the sale of snack foods, beverages, tobacco products, candy and lottery tickets versus the sale of grocery items such as produce, canned and packaged goods, household items, frozen foods and air products.
• Does a separate crew engage in the sale of vehicles?
• If insured is a glass merchant, ask the stock questions for Code 536, Glass Products Mfg., and advise if there is a separate crew, working in a physically separate area, installing auto glass?
• If insured operates a truck stop, provide the overall percentages for each service, note if there are separate crews for each portion of the operation, working in physically separate areas for each service, and ask the stock restaurant questions where applicable.
• If insured does not primarily (more than 50%) engage in the repairing of vehicles, describe the primary exposure and provide the overall business percentages for repairs made to the insured’s own vehicles versus repairs made for unrelated customers.
• If insured primarily repairs/rebuilds a particular auto part, specify what part is involved and advise if the insured removes and replaces the part in the vehicle or whether just the part is received for repair/rebuilding work.
• **Auto Dismantling Operations:**
Does the insured dismantle automobiles for the purpose of recovering reusable parts?
Does the insured dismantle automobiles for the purpose of obtaining scrap metal?
If the insured dismantles automobiles for the purpose of both recovering reusable parts and obtaining scrap metal, provide the percentage of the insured's total revenue that is attributable to each effort.
For recovered scrap metal, provide percentages for ferrous versus non-ferrous metal.
Provide the number of wrecked vehicles currently in the insured's inventory for dismantling purposes.
Provide the size of the insured's dismantling facility or yard in square footage or acreage.
Provide the number of wrecked vehicles the insured will purchase in a typical month.
Does the insured also provide automobile body or general automobile service or repair? If yes, there is a separate/dedicate staff?
Does the insured operate a store for the sale of recovered and/or new automobile parts and accessories at the automobile dismantling location?
Is the store physically separate from the insured's other activities? How is the separation accomplished (e.g., a separate building, a floor to ceiling partition)?
Is there a separate/dedicated counter sales staff for the store operation?
Provide the percentage of the insured’s revenue that is attributable to the sale of new parts, used parts that are purchased from unrelated suppliers and used parts that are recovered through the insured’s own dismantling effort.
Does the insured also operate a store(s) or a distribution facility (ies) at a location separate from the automobile dismantling effort? If yes, provide the complete address for each separately located facility. Also provide the approximate physical distance between the insured’s dismantling facility and each separately located store or distribution facility.
For each separately located store or distribution facility, provide the percentage of the insured’s revenue that is attributable to the sale of new parts, used parts that are purchased from unrelated suppliers and used parts that are recovered through the insured’s own dismantling effort.
Comment on whether each operation at the automobile dismantling location or additional locations is separately staffed.

**Code 816, AUTOMOBILE FILLING STATION**
- Provide the overall business percentages for the repairing of vehicles versus the sale of gasoline (if there is more than one location, provide percentages on a per location basis).
- Provide the overall business percentages for full-service versus self-serve sale of gas.
- Is the sale of gas controlled from within a store?
- If insured also sells auto parts, advise of the percentage of parts used in the repairing operation versus parts sold to store customers and advise if there’s a separate crew and a physical separation for the parts store.
- If the insured operates combination gas stations, auto/truck repair garages &/or grocery stores, provide the overall business percentages for each portion of the operation and ask the stock questions for Code 815, Automobile Service Center, and Code 816, Automobile Filling Station, and Code 917, Grocery Store, and note if there are separate crews and work areas for the various exposures.
- If a grocery store is being operated, provide the overall business percentages for the sale of self-service gas versus the repairing of vehicles versus the sale of snack foods, beverages, tobacco products, candy and lottery tickets versus the sale of grocery items such as produce, canned and packaged goods, household items, frozen foods and airy products.
- If insured operates a truck stop, provide the overall percentages for each service note if there are separate crews, working in physically separate areas for each service and ask that stock restaurant questions where applicable.
- If car operates a car/truck wash, provide overall business percentages for the washing of cars versus trucks and note if the work is primarily performed at the customers’ or the insured’s locations.

**Code 817, BUS OPERATION**
- Please identify each type of transportation service provided by the employer.
- For employer’s operating two or more different types of transportation services (e.g., scheduled bus lines, paratransit, school buses) please break down the business percentages for each type of service.
• For employers operating two or more different types of transportation services please observe whether each service has a separate/dedicated driving staff or whether drivers interchange between the different services.
• Does the employer service/repair his vehicles and equipment? For employers operating two or more different types of transportation services, does the garage staff interchange between the servicing of each transportation service’s vehicles? Are each transportation service’s vehicles serviced in a common garage or are there physically separate areas? How is the physical separation accomplished (e.g., a floor to ceiling partition, a different building)?
• For each type of vehicle please observe the seating capacity not counting the driver.
• Does the employer sell tickets or passes to individual riders? Is there a separate staff of ticket sellers? Where are the tickets sold (e.g., from behind a counter, in a cashier’s booth, over the phone, via the Internet, at a kiosk in a mall)? Are tickets sold by telephone or the Internet mailed to customers?
• For charter bus or tour operators does the employer have a separate tour guide staff? If yes, please be precise regarding the tour guide’s duties. Please also observe where the driver doubles as the tour guide.
• Does any part of the employer’s business also include emergency transport (from an accident scene to a hospital) by an ambulance? If yes, please observe how much of the revenue is so developed and whether this emergency transport is performed by a separate, dedicated (non-interchanging) crew of employees? Such a separate, dedicated crew should be certified as either paramedics or emergency medical technicians.
• Does the employer operate a parking facility (e.g., at or near an airport) and provide valet service to and from the employer’s parking facility and the airport?

**Code 818, AUTOMOBILE DEALER**
• Advise of the number of vehicles, motorcycles, mobile homes, RVs, boats, etc., sold or rented in a typical week, month or year (specify which).
• Does a separate crew engage in the sale of vehicles?
• Does the insured conduct vehicle service and/or repair operations? Provide a representative listing of the services/repairs performed (e. g. oil change, tune up, engine repair, body work).
• Provide the percentage of services/repairs performed on vehicles that the insured has sold, rented or leased versus the services/repairs performed on vehicles owned by outside customers.
• Provide the overall business percentages for the sale/rental versus the servicing/repair of vehicles.
• Does the insured set-up or install mobile homes?
• Does the insured operate an auto auction? How many days a week will the auction operate? Is there a food service? Is the food service separately staffed or outsourced?

**Code 819, AUTOMOBILE SALESPERSON**
• List, and provide overall business percentages for, the sale/rental of each line of merchandise (distinguish between cars, trucks, RVs, Motorcycles, boats, construction, farm and factory equipment, etc.).
• Provide the overall business percentages for sales/rentals/leasing versus servicing work.
• Is there a separate sales crew?
• Does insured engage a separate crew that services, cleans or moves the cars, vehicles, boats, equipment, etc., on the lot?
• If insured repairs its own vehicles and also repairs vehicles for unrelated customers, provide the overall business percentages for each of those two services.

**Code 820, AUTOMOBILE AUCTION**
• Does the insured operate an auto auction? How many days a week will the auction operate?
• Does the insured have a separate crew of auctioneers?
• Does the insured operate a food service in conjunction with the auction?
• Is the food service separately staffed or outsourced?

**Code 821, BEVERAGE DISTRIBUTOR**
• Provide the overall business percentages for sale of each line of merchandise.
• Provide the overall business percentages for sales to the general public for personal consumption versus to retailers, restaurants, taverns, etc.

**Code 825, AUTOMOBILE STORAGE GARAGE OR PARKING STATION OR LOT**
• Is the parking lot or garage situated at a building or property owned or managed by the insured (in other words, is the parking lot or garage operated primarily as a convenience for the insured’s own building that it operates or for its own customers, if it’s a store, hotel, restaurant, shopping center, etc.)?
• Does insured primarily operate a parking facility with valet service to and from the airport?

**Code 828, PARATRANSIT SERVICE**
• Please identify each type of transportation service provided by the employer.
• For employer’s operating two or more different types of transportation services (e.g., scheduled bus lines, paratransit, school buses) please break down the business percentages for each type of service.
• For employers operating two or more different types of transportation services please observe whether each service has a separate/dedicated driving staff or whether drivers interchange between the different services.
• Does the employer service/repair his vehicles and equipment? For employers operating two or more different types of transportation services, does the garage staff interchange between the servicing of each transportation service’s vehicles? Are each transportation service’s vehicles serviced in a common garage or are there physically separate areas? How is the physical separation accomplished (e.g., a floor to ceiling partition, a different building)?
• For each type of vehicle please observe the seating capacity not counting the driver.
• Does the employer sell tickets or passes to individual riders? Is there a separate staff of ticket sellers? Where are the tickets sold (e.g., from behind a counter, in a cashier’s booth, over the phone, via the Internet, at a kiosk in a mall)? Are tickets sold by telephone or the Internet mailed to customers?
• For charter bus or tour operators does the employer have a separate tour guide staff? If yes, please be precise regarding the tour guide’s duties. Please also observe where the driver doubles as the tour guide.
• Does any part of the employer’s business also include emergency transport (from an accident scene to a hospital) by an ambulance? If yes, please observe how much of the revenue is so developed and whether this emergency transport is performed by a separate, dedicated (non-interchanging) crew of employees? Such a separate, dedicated crew should be certified as either paramedics or emergency medical technicians.
• Does the employer operate a parking facility (e.g., at or near an airport) and provide valet service to and from the employer’s parking facility and the airport?

**Code 855, LUMBER BUILDING MATERIAL DEALER**
Refer to the standard Code 935 survey questions in the event the insured operates a separate retail outlet on the premises of the lumber and/or building material dealership.
• List, and provide the overall business percentages by sales income for, the various lines of merchandise.
• Provide the overall business percentages for sales to the general public for personal or household use versus to businesses, contractors, retailers, etc.
• Provide the percentage of merchandise sold from inventory on hand.
• If the insured operates a carpentry shop on the premises, list, and provide percentages for, the raw materials and the finished products.
• Is the shop separately staffed, in a physically separate work area?
• Provide the percentage of merchandise sold by the insured that is produced in their shop versus merchandise received from unrelated manufacturers or distributors.
• Does the insured install any of the building materials sold (e.g., windows)? Is there a separate installation staff?
• If insured operates a quarry, list the minerals being quarried.
• If insured sells cemetery monuments, is there an inventory of monuments being warehoused, delivered and/or handled or moved by store employees.
• Is there a showroom with samples of cemetery monuments on display and do the cutters/polishers/engravers perform the warehousing, delivering work etc.?
• If insured installs or erects stone and/or cemetery monuments, provide percentages for stone cutting/polishing versus field erection work and advise if a separate crew performs the field work?

**Code 857, METAL SERVICE CENTER**
• Provide the types of metal merchandise sold by the insured by percentage.
• Does the insured deal with new metal materials or with scrap metal?
• Does the insured perform any processing on the metal merchandise prior to sale/distribution? If yes, describe in detail.
• Is the processing limited to cutting, slitting, sheeting, bending or burning to size, or will the insured fabricate products (if the insured fabricates products, note the type by percentage and list the materials used)?
• Does the insured level or cut new metal merchandise for unrelated concerns? If yes, describe in detail

**Code 858, FERROUS SCRAP METAL DEALER**
• Provide a breakdown by percentage of ferrous scrap metal (including stainless steel) collected versus nonferrous scrap metals collected. If insureds cannot provide percentages greater than 50/50, note which type of scrap metal handled will predominate most often.
• Describe how the insured will process (sorting, shearing, baling, shredding and crushing) any of the commodities handled.

**Code 859, NONFERROUS SCRAP METAL DEALER**
• Provide a breakdown by percentage of ferrous scrap metal (including stainless steel) collected versus nonferrous scrap metals collected. If insureds cannot provide percentages greater than 50/50, note which type of scrap metal handled will predominate most often.
• Describe how the insured will process (sorting, shearing, baling, shredding and crushing) any of the commodities handled.
• Does the insured melt nonferrous scrap metals in furnaces and pour the melted metals into pig or ingot molds? If so, what portion of the nonferrous metal scrap is processed in this way?

**Code 860, JUNK DEALER**
• Provide a breakdown by percentage of ferrous scrap versus nonferrous scrap versus non-metal used/second hand commodities.
• List all non-metal used/second hand commodities collected and handled by type and percentage.
• If insured is operating a used or second hand building materials yard, note whether or not this is permanently sited and separately staffed. If not permanently sited, will the insured operate temporary second hand building materials “yards” at demolition sites? Does such insured have a separate staff performing the demolition of buildings?
• Provide the overall business percentages, by income, for new versus secondhand/scrap materials?
• Describe in detail any processing/recycling performed on the materials handled.
• If insured demolishes automobiles, are they demolished for the purpose of obtaining scrap metals or in order to obtain reusable parts (if both, provide the percentage attributable to each)?
• **Auto Dismantling Operations:**
  o Does the insured dismantle automobiles for the purpose of recovering reusable parts?
  o Does the insured dismantle automobiles for the purpose of obtaining scrap metal?
  o If the insured dismantles automobiles for the purpose of both recovering reusable parts and obtaining scrap metal, provide the percentage of the insured’s total revenue that is attributable to each effort.
  o For recovered scrap metal, provide percentages for ferrous versus non-ferrous metal.
  o Provide the number of wrecked vehicles currently in the insured’s inventory for dismantling purposes.
  o Provide the size of the insured’s dismantling facility or yard in square footage or acreage.
  o Provide the number of wrecked vehicles the insured will purchase in a typical month.
  o Does the insured also provide automobile body or general automobile service or repair? If yes, there is a separate/dedicate staff?
  o Does the insured operate a store for the sale of recovered and/or new automobile parts and accessories at the automobile dismantling location?
o Is the store physically separate from the insured’s other activities? How is the separation accomplished (e.g., a separate building, a floor to ceiling partition)?
o Is there a separate/dedicated counter sales staff for the store operation?
o Provide the percentage of the insured's revenue that is attributable to the sale of new parts, used parts that are purchased from unrelated suppliers and used parts that are recovered through the insured’s own dismantling effort.
o Does the insured also operate a store(s) or a distribution facility (yes) at a location separate from the automobile dismantling effort? If yes, provide the complete address for each separately located facility. Also provide the approximate physical distance between the insured’s dismantling facility and each separately located store or distribution facility.
o For each separately located store or distribution facility, provide the percentage of the insured’s revenue that is attributable to the sale of new parts, used parts that are purchased from unrelated suppliers and used parts that are recovered through the insured’s own dismantling effort.
o Comment on whether each operation at the automobile dismantling location or additional locations is separately staffed.

Code 862, RECYCLING CENTER
- Is the insured engaged in collecting and/or handling post consumer or recyclable commodities? If yes, provide the types of commodities handled by percentage.
- Does the insured operate a facility for the processing of the recyclable commodities (or does the insured simply collect the recyclable commodities and transport them to an unrelated recycling center)? If the insured operates a facility for the processing of the recyclable commodities, list and describe all processing performed.
- Does the insured collect garbage and/or rubbish (in addition to recyclable commodities)?
- Do employees interchange between the collection of garbage and/or rubbish and recyclable commodities and the operation of the recycling center (or are separate crews used for each operation)?
- Describe the typical customer for the recycled commodities.
- For insureds principally engaged in the collection and/or handling of scrap metals (other than aluminum beverage cans), refer to the Code 858 standard survey questions (for insureds dealing with ferrous scrap metals) or the Code 859 standard survey questions (for insureds dealing with nonferrous scrap metals).
- Refer to the Code 863 standard survey questions for insureds principally engaged in performing paper and/or sensitive document shredding for unrelated concerns.

PAPER SHREDDING
- Does the insured shred or destroy paper or sensitive documents for unrelated concerns?
- Is this a mobile service (where the insured shreds or destroys paper or sensitive documents at customers’ locations) or does the insured operate a processing facility?
- Does the insured also collect and/or handle paper to be recycled (or is all paper that the insured handles shredded for customers)?
- Does the insured also collect and/or handle other recyclable commodities? If yes, provide the types of recyclable commodities collected and/or handled by percentage.
- If the insured operates a processing facility, describe all processing performed on the recyclable commodities.
- What percentage of the insured’s total revenue is derived from the contract shredding or destruction of paper or sensitive documents for unrelated concerns (versus the collection and/or handling of recyclable commodities including paper to be recycled)?
- Refer to the Code 862 standard survey questions for insureds principally engaged in the collection and/or handling of recyclable commodities

Code 865, POULTRY AND/OR FISH DEALER/PROCESSOR
- Describe insured's processing operation in a step-by-step narrative.
- Provide a percentage breakdown between types of items processed, e.g. poultry, fish etc.
- Regarding insured's processing, do changes result in the insured's product due to application of either chemicals and/or heat (the use of smoke and/or cooking)?
- Does the insured simply repackage products, performing no other processing?
• Does the insured perform poultry catching? If so, does the insured also haul the live poultry to the processing plant?

**Code 867, EMPLOYMENT CONTRACTOR – TEMPORARY WAREHOUSING**

• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

**Code 877, EMPLOYMENT CONTRACTOR – TEMPORARY DEPARTMENT STORE**

• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

**Code 879, EMPLOYMENT CONTRACTOR – TEMPORARY PACKAGING**

• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 880, APARTMENT HOUSE
• Is the insured principally engaged in operating apartment houses or condominium complexes?
• If the insured operates apartment houses and/or condominium complexes and commercial properties, provide the overall business percentages for each of those two exposures and advise if there are separate crews and locations for each.
• If the insured operates an apartment house, cooperative or condominium complex, note if the building is age restricted, resident-wise. Are any beds licensed for personal care services?
• If the insured is a homeowners’ association note the total acreage, list the amenities (ex. swimming pool, stables etc.), the number of houses and the services provided by the Association’s employees and services that are outsourced to unrelated concerns.

Code 881, HARDWARE STORE
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 882, HOUSE CLEANING
• Is the insured principally engaged in cleaning houses on a contract basis?
• If the insured cleans apartment houses and/or condominium complexes and commercial properties, provide the overall business percentages for each of those two exposures and advise if there are separate crews and locations for each.
• If the insured operates an apartment house, cooperative or condominium complex, note if the building is age restricted, resident-wise. Are any beds licensed for personal care services?
• If the insured is a homeowners’ association note the total acreage, list the amenities (ex. swimming pool, stables etc.), the number of houses and the services provided by the Association’s employees and services outsourced to unrelated concerns.

Code 883, EMPLOYMENT CONTRACTOR - RETAIL STORE
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an employee leasing company. (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 884, HEALTH OR EXERCISE CLUB
• Does the insured primarily operate a health or exercise club?
• Does the insured operate an indoor or an outdoor amusement facility?
• Does the insured operate any type of sports training facility?
• If this facility is part of another operation (such as an apartment complex, hotel, hospital etc.), provide the percentages for its patrons who are residents, guests or patients at the other operation versus its patrons who are not related to the other operation.

Code 885, PLUMBING SUPPLIES DEALER OR PIPE MERCHANT
• List, and provide percentages for, the various items sold/distributed by the insured.
• Provide the business percentages for sales to each type of customer.
• Provide percentages for merchandise that is shipped or delivered by the insured versus merchandise that is drop-shipped by the supplier/manufacturer versus that which is taken out, by the customers.

Code 886, ELECTRICAL SUPPLIES DEALER
• List, and provide percentages for, the various items sold/distributed by the insured.
• Provide the business percentages for sales to each type of customer.
• Provide percentages for merchandise that is shipped or delivered by the insured versus merchandise that is drop-shipped by the supplier/manufacturer versus that which is taken out, by the customers.

Code 887, MUSEUM
• Is the insured primarily engaged in procuring, preserving and displaying objects of artistic/cultural interest (specify the types of items/artifacts/artwork being shown)?
• How often are displays changed?
• List the various services or programs being offered (ex. classes, lectures, films, other entertainment, conservation/restoration labs, gift shops, eating facilities, etc.) noting which are staffed by employees or outsourced to unrelated contractors.

**Code 888, Homeowners Association (Effective 4/1/21, Code 888 Applies in Delaware Only. Homeowners Associations and Mobile Home Parks assigned to Code 880 in Pennsylvania Effective 4/1/21)**

- Is the employer an association responsible for the governance of a residential planned community?
- Was the association formed pursuant to Section 5302 of the Planned Community Act (PCA) of the Pennsylvania Code?
- Describe the type of property that the employer oversees e.g., is this a community consisting of detached houses or townhomes, a high rise consisting of condominium units, etc.?
- List all functions performed by the employer, such as maintenance and repair of common elements, security, etc.
- List all amenities operated by the employer for the use of the residents (e.g., swimming pools, tennis courts, etc.).
- Does the association operate any of the following: restaurant, golf course, sewage disposal plant or water supply system, horse stable or marina? If yes, advise if those operations are separately staffed and conducted in a physically separate work area.
- Does the employer operate a mobile home park?

**Code 889, EMPLOYMENT CONTRACTOR – TEMPORARY CLERICAL**

- For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.

**Code 890, LIBRARY - PUBLIC**

- Does the insured maintain a collection of books, magazines, videos, compact audio discs and/or other literary or artistic materials for use by the general public and/or members?
- Does the insured maintain a collection of private historical records (e.g., diaries, manuscripts) or public historical records (e.g., court transcripts, property deeds and transfers, probated wills, voting records)? Is access to these available to the general public, members or by appointment?
- May any or all of the materials be borrowed/taken from the premises for specified time periods?
- Must a person be a member to have borrowing or access privileges?
• Note any other services the facility may provide which may include but are necessarily limited to: lectures, workshops, children’s programming (e.g., storytelling, summer reading), adult literacy classes or providing meeting space for local organizations.
• In the event the insured also performs an additional effort (e.g., the procuring, preserving and display of objects of artistic or cultural value) provide an overall breakdown of business percentages, note whether there is separate staffing for which operations or a common building maintenance staff, whether there are physically separate work areas and how that separation is accomplished (e.g., separate floors, separate buildings), the operating hours and whether there is a common or separate entrance(s).

Code 891, PRE-SCHOOL (CHILD CARE OR EARLY EDUCATION) SERVICES
• Does the employer provide educational and/or child daycare services for preschool age children?
• What is the minimum age for a child to receive the employer’s preschool educational and/or child daycare services?
• Do the preschool age educational service(s) include nursery school and/or kindergarten?
• Does the employer also have a before and/or after school program for school age children? What is the maximum age for children in the before and/or after school program?
• Does the employer also have a summer program, which the employer may characterize as a “camp” for school age children? If yes, for how many weeks does this program run and what is the maximum age for children?
• Does the employer offer services to special needs children? If yes, please identify the type(s) of special need(s) and how many of the overall number of children have a special need. Does the care of the special needs child or children include medical care?
• Does the employer primarily operate a federally funded “Head-Start Program” for children of low-income families?
• The employer is licensed for what maximum child capacity?
• Please provide a head count of children broken down by program (e.g., nursery school, kindergarten, all day daycare).
• Does the employer also provide elementary school (e.g., grades one through three, one through four, one through five, one through whatever grade level) education services at this or another address/location?
• If yes, to what grade level? How many children are there in total in the elementary or higher grades?
• Is the employer licensed by the Commonwealth of Pennsylvania? If yes, how is the employer licensed? If the employer also provides elementary grade education services, is this separately licensed?
• Please obtain a copy of the license(s) if possible.
• Please list the employer’s operating days and hours.
• If all educational programs are at a single location please provide a diagram or clearly indicate in the “Processes” narrative whether the different educational programs are conducted on separate floors or in a physically separate department on the same floor. How is the physical separation accomplished (e.g., a floor to ceiling partition)?
• Are the different educational programs separately staffed? When listing staff please note any degrees or professional designation staff may hold. Comment as warranted regarding personnel interchange.

Code 892, EARLY INTERVENTION
• Does the employer provide Early Intervention services?
• What percentage of the employer’s services is provided to children from birth to 3 years of age (under Part C of the Individuals with Disabilities Act)?
• Does the employer develop the written service plan (called the Individualized Family Service Plan) for clients from birth to 3 years of age?
• What percentage of the employer’s services is provided to children from 3 years of age to the age of beginners i.e., the earliest age at which the child may enter first grade in the child’s school district (under Part B of the Individuals with Disabilities Act)?
• Does the employer develop the written service plan (called the Individualized Education Program) for clients from 3 years of age to the age of beginners?
• What percentage of the employer’s services is provided to clients over the age of beginners?
• List and describe the services provided to clients in each age group.
• Note the location at which services are provided to clients in each age group (e.g., the child’s home, day care, school, etc.).
• Does the employer use separate staff to provide services to each age group?
• List all employees and provide the professional designation and/or educational training/background of all employees directly providing services to clients.
• Funding for Early Intervention may be provided under the Infant, Toddlers and Families Medicaid Waiver. Is this how the employer’s services are funded?

Code 893, INTERMEDIATE UNIT
• Does the employer operate an Intermediate Unit as established by the Pennsylvania General Assembly (Title 24, Article IX-A, Intermediate Unit) effective July 1, 1971?
• If the insured operates a special education school that offers programs to mentally challenged, blind or emotionally disturbed children, describe the insured’s curriculum
• If the insured operates more than one type of school/educational program at the same location/campus, provide the overall business percentages for each program.
• What grade levels are included in the insured’s curriculum?
• Describe the insured’s typical student (what are their disabilities).
• Are the insured’s education programs provided at their own facility or in classrooms of unrelated schools?
• What educational requirements for the teachers at the insured’s school (are they state certified)?
• How is the insured licensed by the state (provide a copy of the license)?

Code 895, EMPLOYMENT CONTRACTOR – TEMPORARY COLLEGE OR SCHOOL
• For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

Code 896, CLUB, NOC
• Is the insured operating a private club?
• List and briefly describe the services/amenities provided in conjunction with this endeavor (i.e. dining room, bar, lounge, swimming pool, bowling lanes, card room, etc.).
• What, if any, prepared food items does the insured sells?
• If the insured sells alcoholic beverages by the individual drink, provide the percentage of total revenue generated by the sale of such beverages.
• What are the operating days and hours of the insured's club?
• Is the insured's facility open to members of the general public or is membership to this organization required?
• Does the insured also offer catering services to the general public (non-members)? If yes, obtain the revenue so developed and note whether the effort is separately staffed.

**Code 897, FAST-FOOD RESTAURANT**
• Is the insured operating a restaurant selling fast food (i.e. hamburgers, tacos, chicken, pizza, etc.)?
• Do the insured's customers serve themselves and/or staff serve food to customers in a buffet line?
• List the prepared food items sold by the insured. Be specific.
• Is the food/drink served on paper/plastic plates and cups and with plastic utensils or are china dishes, glasses and metal utensils used?
• What is the insured’s seating capacity?
• Does the insured have a crew of employees dedicated to waiting on table (if so, list the duties of the wait staff).
• Are the customer’s food orders placed at the counter?
• Does the insured have a drive thru service?
• Can customers place food orders by telephone?
• If the insured sells alcoholic beverages by the individual drink, provide the percentage of total revenue generated by the sale of such beverages.
• Does the employer operate a brewpub, microbrewery, gastropub, etc. that brews beer on the premises? If so, what percentage of beer brewed on the premises is sold for on-site consumption versus distributed to other concerns, typically bars, or restaurants?
• If possible, provide a copy of the insured's menu.

**Code 898, CATERER**
• Does the insured provide catering services for weddings, parties or other special events?
• Does the insured provide in-house food services for hospitals, businesses, nursing homes, schools or other similar customers?
• Does the insured operate concession stands at stadiums, amusement parks, theaters, etc.?
• Does the insured sell prepared food items from a vehicle with cooking equipment that travels to different locations (i.e. construction sites, factories, schools, etc.)?
• List the food items prepared and sold by the insured.

**Code 899, BAR, NIGHTCLUB**
• Is the insured primarily operating a bar/tavern/nightclub?
• Is the insured engaged in the sale of alcoholic beverages by the individual drink?
• If the insured is also engaged in the sale of prepared food items, list the food items prepared/sold.
• If the insured has a wait staff, list the duties typically performed by the waiters/waitresses.
• Does the employer operate a brewpub, microbrewery, gastropub, etc. that brews beer on the premises? If so, what percentage of beer brewed on the premises is sold for on-site consumption versus distributed to other concerns, typically bars, or restaurants?
• What is the insured’s seating capacity?
• Provide the percentage of revenue generated by the sale of alcoholic beverages versus non-alcoholic beverages and prepared food items.
• What are the operating days and hours of the insured’s facility?

**Code 903, LABOR UNION**
• Is the insured primarily a labor union?
• Does the union offer apprenticeship or other training programs?
• Is there a janitorial staff maintaining the insured’s premises/buildings/grounds?

**Code 904, INVESTIGATIVE AGENCY**
• Note the different types of investigative services the insured may offer (e.g., insurance, background checks, missing persons, criminal cases for lawyers, divorce, etc).
• Does the insured specialize in any type of investigative service? If yes, specify and advise what part of the overall revenue is so developed.
• Is undercover work performed? If yes, how often will undercover work be performed? If possible give an example of a type of undercover scenario (e.g., in a factory to investigate possible theft or industrial espionage).
• Does the insured perform surveillance? If yes, how often will surveillance be performed? If possible give an example of a type of surveillance scenario (e.g., checking on insurance claimants).
• If insured also provides security guard staff and/or installs/repairs alarms, specify if there are separate crews for each exposure and ask the standard questions for Code 660, Alarm or Sound System, Installation or Repair, and Code 954, Security Agency.

**Code 905, Consulting Architectural Firm**
The questions below are based upon the premise the employer provides services principally to exclusively for unrelated businesses. In the event you find the services are provided for the business being surveyed or a related business please so indicate. Please also indicate (e.g., for the business being surveyed) whether the business has any construction or manufacturing operations with particular reference to such being conducted in Pennsylvania. Please further indicate In the event all construction or manufacturing is performed in another state or another country.

Does the employer perform any of the following services? Please note the relevant revenue percentages and separately describe each of the services performed.

  o Does the employer plan and design new buildings, how an existing building should be remodeled and/or adapted for a new use?
  o Does the employer design landscapes?
  o Does the employer design the interiors of buildings?
  o Please observe any additional services the business may perform.

Note – on tasks being outsourced such may include but are not necessarily limited to: obtaining and testing of subsurface soil samples, obtaining building permits.

When listing the employer’s staff please try to secure percentages regarding the relative time is spent “in the office” in relation to time “spent out of the office” for any business purpose including the visits to building sites. The employee listing should also include any professional (educational) degrees or certifications of staff as warranted along with the listing by job duties and number. Please further indicate interchange between different tasks as warranted.

**Code 907, FRUIT OR VEGETABLE DEALER**
• Is the insured primarily operating as a distributor of fruits and/or vegetables?
  Provide the overall business percentages, by income, for the sale of each line of merchandise.
  Provide the overall business percentages, by income, for sales to each type of customer.
  Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.
  Does the insured provide fruit/vegetable packing services for unrelated concerns (what percentage of the income does this work generate)?
  Does the insured’s packing operating include fruit and/or vegetable canning (if “yes”, describe)?

**Code 910, MEAT DEALER**
• Is the insured primarily engaged in the sale of fresh and/or processed meats?
  Describe any de-boning and/or cutting of the fresh meats into steaks, roasts, chops, etc., being performed by the insured.
  Describe any manufacturing of natural sausage casings that the insured performs.
• If the insured performs any animal slaughtering, indicate the number of animals slaughtered in a typical week/month/year.
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

**Code 911, GROCERY (Wholesale)**
• Is the insured primarily operating as a distributor of grocery items, including canned/packaged foods?
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

**Code 914, DEPARTMENT STORE**
• Specifically indicate whether the business sells the following lines of merchandise:
  o Clothing (including shoes)
  o Linens (e.g., woven or knitted bed, bath, table and/or kitchen textiles)
  o House furnishings other than furniture (e.g., carpet, curtains, drapes)
  o Furniture (including major appliances)
  o Cosmetics
  o Giftware
  o Hardware
  o Jewelry
  o Luggage
  o Stationary and/or greeting cards
  o Sporting goods
  o Toys.
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.
• What percentage of each store’s revenue is generated by the sale of clothing, linens and house furnishings?
• Indicate the number of full-time and part-time employees at each of the insured’s store facilities.

**Code 915, MEAT, FISH AND/OR POULTRY STORE**
• Is the insured primarily operating a store selling meat, poultry and/or fish?
• Provide the overall business percentages, by income, for the sale of each line of merchandise (be sure to provide a separate category for meat, fish and poultry).
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.
• If the insured performs animal slaughtering, indicate the number of animals slaughtered in a typical week/month/year (specify which).
• What percentage of the meat products obtained from the slaughtering are sold over-the-counter to the general public for individual/household consumption?
• If the insured performs custom killing of animals (steer, pig, sheep, etc.) for private individuals and/or farmers, how many such killings are done in a typical day/week/month (specify which)?
• Does the insured also dress deer carcasses for individual deer hunters during deer hunting season?
• What are the business’ operating hours?
• What is the physical size of the facility by its length and width?
• Is any merchandise displayed for immediate sale? If the answer to this is “no,” then please advise if samples are displayed.
• Does the business display merchandise available for immediate sale in aisles that the customer may walk up and down to inspect displayed merchandise and select desired items?
• If the merchandise is displayed in aisles please note how many aisles there may be.
• Is the merchandise displayed only on racks behind a sales counter or in front of the sales counter?
• Are baskets and/or carts provided for customer use as they browse/select merchandise?
• Does the business have a separate customer parking lot? What is the parking lot’s length and width and/or how many cars may be parked concurrently?
• What is the approximate volume of foot traffic for a typical business day by number of persons (e.g., five, twenty-five, two hundred or more)?
• Here the classification staff needs the field representative’s “local knowledge” of where the business is located. In what type of area is the business located (e.g., in a shopping mall, a strip mall, in an industrial park)? If the business is in a stand alone building are there houses and/or other what general types of businesses nearby? If the business is in a rural (a farming, heavily wooded or any low density population) area please so indicate.

**Code 916, CLOTHING OR DRY GOODS STORE**

• Is the insured primarily operating a clothing, shoe or dry goods/fabric store or distribution center
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

**Code 917, GROCERY STORE**

• Is the insured primarily engaged in the sale of grocery items?
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

**Code 918, BAKERY SHOP**

• On a per location basis provide a sales breakdown as follows: breads and rolls; cakes/pies/pastries; donuts; bagels; muffins or croissants; pretzels; cookies; hot or cold sandwiches; coffee and/or coffee derived beverages by the cup; coffee by the pound, bottled beverages; and anything else (identify).
• Provide a breakdown by percentage of a typical customer between the general public purchasing items for their or household consumption in relation to commercial concerns (e.g., stores and restaurants) or to institutions (e.g., schools).
• If the business is a franchised operation, identify the type of franchise (e.g. Dunkin Donuts, Krispy Kreme, Auntie Anne’s Pretzels, etc.).
• Identify any location where baked goods are made. Briefly describe the production process. List by type and percentage the baked goods produced. What part of the baked goods production goes to the insured’s satellite locations? What part of the baked goods production is sold to unrelated businesses?
• List the materials used in the baked goods production. Does the insured utilize scratch ingredients (e.g., flour, sugar) or pre-mixed dry ingredients or pre-mixed frozen dough?
• Does the insured operate satellite locations/stores? A satellite store typically does not produce baked goods, but sells baked goods produced at the insured’s production site(s). If yes, how many? list each satellite store’s address. If the insured operates multiple locations, and the operations are essentially identical at each location, visits to the additional locations in the field representative’s territory are voluntary on the field representative’s part.
• Also list staff per location. Do any locations operate on a 24/7 basis? Identify any locations that operate on a 24/7 basis and also identify those locations that do not. Where applicable, indicate the customer seating capacity of each location.

Code 919, FLORIST STORE
• Is the insured primarily operating a store that is primarily engaged in the sale of floral arrangements, flowers potted plants and/or florist supplies?
• If the insured sells plants, provide the percentage of revenue that is attributable to the sale of indoor decorative plants versus outdoor bedding plants.
• Is the insured engaged in the raising of the flowers and plants sold from its store or are these items purchased from unrelated concerns and resold?
• If the insured is engaged in the raising of flowers and/or plants, describe this exposure and provide the percentages, by income, for the raising of each item listed.
• Is the insured a "plantscaper", maintaining living plants inside the customers’ premises (ex. malls, offices, other businesses and in homes)
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

Code 920, JEWELRY STORE
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

Code 921, FURNITURE STORE (PA only)
• Is the insured primarily operating a store primarily engaged in the sale and/or rental of furniture, floor coverings and/or large household appliances (i.e. refrigerators, stoves, washing machines, etc.)?
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.
• Provide the overall business percentages, by income, for sales versus service and note if there are separate crews for each.
• If the insured operates as a taxidermist, describe those activities.

Code 922, FURNITURE STORE
• Is the insured primarily operating a store primarily engaged in the sale and/or rental of furniture, floor coverings and/or large household appliances (i.e. refrigerators, stoves, washing machines, etc.)?
• Provide the overall business percentages, by income, for the sale of each line of merchandise.
• Provide the overall business percentages, by income, for sales to each type of customer.
• Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.
• Provide the overall business percentages, by income, for sales versus service and note if there are separate crews for each.

Code 923, PACKAGING – CONTRACT – NON-CRATING
• If the insured primarily engages in packaging and/or repackaging goods for unrelated concerns, specifically list the items being packaged.
Does the insured primarily perform packaging of its own products or merchandise?
Does the insured package explosives?
For what types of customers are the packaging services typically provided?
Are the packaging services performed at the client's facilities or at the insured's own location?
List the containers used by the insured to package the customer’s items.
Does the insured package goods in wooden crates that it manufactures?
If the insured is engaged in the filling of aerosol cans for unrelated manufacturers, describe this exposure and note for what type of customer this work is performed.

**Code 924, WHOLESALE STORE**
- Is the insured primarily operating a store/distribution center?
- Provide the overall business percentages, by income, for the sale of each line of merchandise.
- Provide the overall business percentages, by income, for sales to each type of customer.
- Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

**Code 925, HARDWARE STORE**
- Is the insured primarily operating a store that is primarily engaged in the sale of hardware and hardware related merchandise?
- Provide the overall business percentages, by income, for the sale of each line of merchandise.
- Provide the overall business percentages, by income, for sales to each type of customer.
- Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.
- Does the employer service or repair major household appliances? If yes, provide the types of appliance serviced or repaired by percentage.
- Does the employer service or repair televisions or other video or audio equipment. If yes, provide the types of equipment serviced or repaired by percentage.
- Does the employer use a separate crew to perform the service or repair work?

**Code 926, HARDWARE STORE**
- Is the insured primarily operating as a distributor of hardware and/or hardware related merchandise
- Provide the overall business percentages, by income, for the sale of each line of merchandise.
- Provide the overall business percentages, by income, for sales to each type of customer.
- Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

**Code 927, PHARMACY**
- Is the insured primarily operating a pharmacy that sells prescription drugs?
- Provide the overall business percentages, by income, for the sale of each line of merchandise (prescription drugs versus over-the-counter medications and health and beauty aid etc..)
- Is the insured primarily engaged in filling individual patient prescriptions that have been received through the mail and/or faxed?
- Provide the overall business percentages, by income, for sales to each type of customer.
- Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.
- Does insured, using a separate crew, teach the customers to perform home infusions, respiratory therapy etc., in their homes or do the employees actually perform home infusion or respiratory therapy work on the regular/scheduled basis?
- Does the insured operate a medical marijuana dispensary? If yes, provide the types of merchandise sold by percentage and note the form in which the products are sold (e.g., leaves for smoking, capsules, tinctures, etc.)
- If the insured operates a medical marijuana dispensary, do they also operate a medical marijuana growing facility in Pennsylvania? If yes, is the growing facility physically separated or separately located and separately staffed?
- If the insured operates a medical marijuana growing facility, describe any processing performed by the insured after it is harvested (e.g., clipping of leaves, producing tinctures, capsules, etc.) and note if the processing work is performed by separate staff in separate work areas.

**Code 928, RETAIL STORE**
- Is the insured primarily operating a store?
- Provide the overall business percentages, by income, for the sale of each line of merchandise.
- If the insured sells plants, provide the percentage of revenue that is attributable to the sale of indoor decorative plants versus outdoor bedding plants.
- Provide the overall business percentages, by income, for sales to each type of customer.
- Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.

**Code 929, EMPLOYMENT CONTRACTOR – TEMPORARY STAFF – MERCANTILE OPERATIONS**
*(Discontinued in Pennsylvania effective 12/1/10; still in effect for Delaware)*
- For guidance, consult the Rulings & Interpretations Entry on pages 3 & 4 of Section 5 of the Manual.
- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.

**Code 932, COPYING OR DUPLICATING SERVICE**
- Secure the make and model number for each printing unit (you may use the term “printing unit” in the event you do not wish to enter printing units as photocopiers, duplicators or presses on your reports. The classification analyst should decide which printing units are presses and which are duplicators based upon the information that you provide).
  o Separately identify/list which printing units are sheet fed, which are web fed, which are photocopiers or which are for screen printing.
  o For all sheet fed printing units excepting only the screen printing units, also cite the maximum sheet size that each sheet fed printing unit may utilize (it is not necessary to ask this question for screen printing units which may be screen printing a broad variety of substrates in addition to paper, e.g., apparel – t-shirts).
o For sheet fed printing units further observe which are offset and which are letterpresses.
o For web fed printing units note which are offset, gravure, letterpress or flexography.
o Indicate the width of the web for each web fed unit.

- The listing of sheet printing equipment will also note each printing unit's color capacity. For this observe how many color towers each printing unit has. Also observe the following scenario as warranted: you are informed that a printing unit has four color capacity, but that printing unit has only two color towers, meaning printed product must be passed through that unit twice to achieve four color work.

- For letterpress printing units observe whether the insured uses such exclusively to finish (e.g., number pages, score or perforate) product printed on other printing units and/or whether the insured uses the letterpress units to print product.

- Break down overall print production between:
o That part printed on offset printing units with a maximum sheet size of 17 x 22 inches or less except for production on any four color tower unit or any Halm unit, for which separate business percentages shall be separately listed (four color tower sheet fed printing units made by Ryobi, e.g., the 3304H, or A. B. Dick Co. are offset printing units that use a paper size less than 17 x 22 inches, but these offset printing units will be construed to be presses and not duplicators. The duplicator is a "small" offset unit, and the four tower units' size makes them more like a press than a duplicator. In other words, they are not "small." Separately list the production percentages for such four color tower units. Halm printing units are for envelopes. They have perfector capacity (meaning they may print both sides concurrently) and their volume capacity is such that they are being construed as presses and not as duplicators.
o That part printed on offset units with a maximum sheet size greater than 17 x 22 inches.
o That part printed on letterpress units for sheets of any size.
o That part printed on any type of web press unit.
o That part screen printed.
o That part printed on four color tower printing units such as the Ryobi 3304H or similar A. B. Dick Co. four color tower units.
o That part printed on Halm units.

- List the insured's materials.
o Indicate whether paper is received in rolls or in sheets of what size. What part is received in rolls in relation to what part is received in sheets?
o Will the rolls or the sheets be cut down prior to printing or as a part of the finishing process? Note that certain web presses have a "sheeter" capacity, which means such web press will cut printed product into sheets as the product leaves the press.

- You may be informed the insured utilizes (or also utilizes) ink jet or digital printing units. Both may reproduce what is termed variable information, which is "different" information on a per copy basis. For example an ink jet unit may be used to print addresses and a digital unit may be used to print "personalized" letters for advertisers. In such case:
o Separately identify the ink jet and the digital units.
o Observe how the insured may utilize such units and separately list each type of unit's product.
o Keep in mind that a digital unit may print using liquid ink or toner. For this reason indicate on a per digital unit basis which use liquid ink and which use toner. In the event liquid ink is used then the unit's maximum sheet size must also be indicated.
o For business percentages: use the sheet size differentiation listed above if liquid ink is used (greater than 17 x 22 inches or 17 x 22 inches or less).
o If toner is used such production may be construed as photocopying meaning sheet size is not pertinent.

- Use separate paragraphs to depict the insured's pre-press and post-press operations (ex. finishing, including numbering pages, scoring, perforating, binding). For your information thermography is construed as a finishing operation (e.g., when printing invitations). Is there a separate bindery staff?

- Regarding any printing work being performed, provide a representative listing of the insured's printed product(s). If possible provide a percentage breakdown between different types of products and in particular products that may be assigned by an Underwriting Guide entry to different classes (e.g., newspapers – to Code 282, business forms – to Code 281).
**Code 933, VENDING OR COIN-OPERATED MACHINE**

- Is the insured engaged in the installation/service/repair of vending machines and/or coin operated amusement machines (i.e. video games, juke boxes, etc)?
- Is the insured engaged in replenishing supplies in vending machines and/or collecting money deposited in coin operated machines?
- Is the insured primarily engaged in renting/leasing/servicing coin-operated washers and dryers for such customers as apartment buildings, dorms, etc.? 
- Is the insured engaged in the service and repair of parking meters?
- Does the insured replenish coffee supplies for restaurants, offices and other concerns?
- How often are coffee supplies replenished (is it on a regular schedule - i.e. weekly, biweekly, monthly)?
- Does the insured supply the brewing equipment in conjunction with the coffee sales?
- Does the employer prepare sandwiches or other food items that are sold through their vending machines? If yes, list the types of foods prepared and note if this work is performed by separate staff in a separate work area.

**Code 934, AUTOMOBILE PARTS AND ACCESSORY STORE**

- Is the insured primarily operating a store selling automobile parts and accessories?
- Provide the overall business percentages, by income, for the sale of each line of merchandise.
- Provide the overall business percentages, by income, for sales to each type of customer.
- Provide the overall business percentages, by income, for merchandise that is taken out by the customers versus items delivered by the insured versus items dropped shipped directly by the manufacturer/distributor versus items shipped UPS/common carrier etc.
- If the insured is operating an automobile service center in conjunction with the parts store, what percentage of the parts sold by the insured are used in their own service center?
- Does the insured engage separate crews, working in physically separate work areas, for the store and service center operations?
- If the insured operates a machine shop, does a separate crew, in a physically separate work area, conduct this work?

**Code 935, LUMBER AND/OR BUILDING MATERIAL DEALER**

- Does the insured operate a co-located outlet/store on the premises of a lumber and/or building materials dealership?
- Is the outlet physically separated from the other operations at the location? How is the separation accomplished (e.g., a separate building, floor to ceiling partitions)?
- If yes, separately list the types of merchandise displayed and sold in the outlet. Separately list any merchandise displayed in the outlet (e.g., windows, doors, roofing shingles) that is inventoried in a warehouse or in the yard.
- Does the outlet have a separate/dedicated staff?
- What are the outlet’s operating hours?
- Provide the percentage of total revenue that is attributable to the sale of the merchandise displayed and sold in the outlet.
- What is the physical size of the outlet? The outlet’s length and width will do.
- Is the outlet area lit in the same manner as “retail store” businesses previously visited by the field representative?
- Is the co-located outlet an “Ace Hardware,” “True Value” or another retail hardware franchise? Identify which franchise is held.
- Do the outlet’s counter staff process orders for any type of merchandise (e.g., lumber) received by facsimile, telephone or the Internet? If not, identify which employees perform this task.
- How is the outlet’s merchandise displayed – in aisles that the customers may walk up and down to inspect and select items?
- If the outlet does not have display aisles, is the outlet’s merchandise on racks behind the counter or in front of the counter?
- Are there baskets or shopping carts for the customers to use as they browse/select merchandise?
• In what type of area is the insured located – are there retail stores nearby, is it an industrial area (in an industrial park), a commercially zoned area that has many houses/personal houses nearby)?
• What volume of foot traffic does the outlet have for a typical business day (e.g., five, twenty-five)?
• Does the insured have a separate customer parking lot? How large is that customer parking lot?

**Code 936, BROADCASTING STATION**
• Is the insured operating a radio and/or radio television broadcasting station?
• Is the insured operating a video or motion picture production company?
• Does the insured provide video editing and/or duplicating services for unrelated concerns?
• Is the insured a videographer, taping social events, like weddings, or business events, such as seminars?

**Code 937, EMPLOYMENT CONTRACTOR – TEMPORARY HEAVY SERVICE**
*(Discontinued in Pennsylvania effective 12/1/10; still in effect for Delaware)*
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured's clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there's no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an Employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.

**Code 939, CARNIVAL - TRAVELING**
• Is the insured operating a traveling amusement center, circus, carnival or fair?
• List the amusements, rides and games operated by the insured.
• If the insured sells prepared food, list the food items typically prepared/sold and confirm if the food sales is handled by a separate crew.
• How long does the insured typically operate from a particular location or site?

**Code 940, RESIDENTIAL CARE FACILITY**
• Describe the type(s) of residential facility operated by the insured. List the addresses of additional facilities or locations.
• What is the maximum client occupancy of each facility or program?
• Describe the typical diagnosis or disabilities (if any) of the facility’s typical residents (e.g. intellectual disability, developmental disability, mental illness and/or physical disability).
• Describe the typical age of the facility’s residents (e.g. children through age 21, 21 and older, 65 and older, etc.)
• In the event the insured operates a residential facility for children who are adjudicated juvenile delinquents, disturbed children or developmentally disabled children please also ask the standard Code 894 survey questions.
• Describe the level of care provided for the residents at the residential facilities. Does the insured provide medical care? Does the facility provide 24/7 care or supervision?
• List all state issued licenses held by the insured for both their residential and any non-residential programs and note the issuing agency. If at all possible, provide a copy of each license.

• Does the insured operate any day program (that may be called and separately licensed as an adult training facility) providing non-paid vocational training, functional daily living skills, social skills training or other social or recreational activities. If so please describe this program noting the operating hours and in particular the percentage of clients attending each day program who reside in the insured’s residential facilities vs. non-resident clients. Is this effort separately staffed?

• Does insured operate a separately located and staffed work center (may be called a sheltered workshop or vocational facility) providing paid employment opportunities to individuals with disabilities? Please observe whether this is separately staffed.

Code 941, SOCIAL REHABILITATION FACILITY
• Describe the type(s) of residential facility operated by the insured. List the addresses of additional facilities or locations.

• What is the maximum client occupancy of each facility or program?

• Describe the typical diagnosis or disabilities (if any) of the facility’s typical residents (e.g. intellectual disability, developmental disability, mental illness and/or physical disability).

• Describe the typical age of the facility’s residents (e.g. children through age 21, 21 and older, 65 and older, etc.)

• In the event the insured operates a residential facility for children who are adjudicated juvenile delinquents, disturbed children or developmentally disabled children please also ask the standard Code 894 survey questions.

• Describe the level of care provided for the residents at the residential facilities. Does the insured provide medical care? Does the facility provide 24/7 care or supervision?

• List all state issued licenses held by the insured for both their residential and any non-residential programs and note the issuing agency. If at all possible, provide a copy of each license.

• Does the insured operate any day program (that may be called and separately licensed as an adult training facility) providing non-paid vocational training, functional daily living skills, social skills training or other social or recreational activities. If so please describe this program noting the operating hours and in particular the percentage of clients attending each day program who reside in the insured’s residential facilities vs. non-resident clients. Is this effort separately staffed?

• Does insured operate a separately located and staffed work center (may be called a sheltered workshop or vocational facility) providing paid employment opportunities to individuals with disabilities? Please observe whether this is separately staffed.

Code 942, HOME HEALTH CARE
• Does the insured provide health care services to individuals or families in their residences?

• Specify which of the following skilled services the insured provides: nursing care, home infusion therapy, physical, speech, and/or occupational therapy.

• Specify which of the following nonprofessional services the insured provides: home health aides, attendant care, companions, live-ins, and home support personnel (e.g., homemakers and chore workers).

• Does insured provide temporary medical personnel to health care facilities such as hospitals, nursing homes and medical practices (and is this service performed by a separate crew)?

• Note any degrees or professional designations held by the insured’s employees.

• If the insured sells medical supplies, list the types of merchandise sold by percentage.

• What percentage of the medical supplies is sold to individuals for personal use?

• If the insured operates a health care center or provides health care services to unrelated health care facilities, describe in detail.

• Does the insured use separate crews to perform each service?

• Provide the percentage of revenue attributable to professional home health care versus non-professional home health care versus temporary staffing to unrelated medical facilities versus the other services.

Code 943, HOME HEALTH CARE
• Does the insured provide health care services to individuals or families in their residences?
• Specify which of the following skilled services the insured provides: nursing care, home infusion therapy, physical, speech, and/or occupational therapy.
• Specify which of the following nonprofessional services the insured provides: home health aides, attendant care, companions, live-ins, and home support personnel (e.g., homemakers and chore workers).
• Does insured provide temporary medical personnel to health care facilities such as hospitals, nursing homes and medical practices (and is this service performed by a separate crew)?
• Note any degrees or professional designations held by the insured’s employees.
• If the insured sells medical supplies, list the types of merchandise sold by percentage.
• What percentage of the medical supplies is sold to individuals for personal use?
• If the insured operates a health care center or provides health care services to unrelated health care facilities, describe in detail.
• Does the insured use separate crews to perform each service?
• Provide the percentage of revenue attributable to professional home health care versus non-professional home health care versus temporary staffing to unrelated medical facilities versus the other services.

Code 944, CLUB
• Separately describe each activity provided by this insured.
• Does the insured operate a pro shop?
• Does the insured operate a restaurant?
• Does the insured offer hotel accommodations?
• Does the insured operate a marina or yacht basin? If yes, describe and advise if it is separately staffed.

Code 945, HOTEL RESTAURANT
• In the event the insured's overnight, several days or weekly room rental business also operates a prepared food service and/or the sale of alcoholic beverages by the drink, see Code 973.

Code 946, EMPLOYMENT CONTRACTOR – TEMPORARY MEDICAL
For guidance, consult the Rulings & Interpretations - Section 5 of the Manual.
• Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
• List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
• Does insured provide temporary medical staffing (including pharmacists) to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
• Does the insured recruit and train its employees?
• Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
• How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
• Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
• Can the insured change the employee assignments during the terms of the contracts?
• Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
• Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
• Attach a blank (sample) contract.
• If insured also performs home health care, ask the standard questions for Codes 942 and 943 and provide the overall business percentages for temporary medical staffing versus professional home health care versus non-professional home health care (and advise if there’s a separate crew for each service).

Code 947, EMPLOYMENT CONTRACTOR – TEMPORARY MAINTENANCE OR SERVICE
(Discontinued in Pennsylvania effective 12/1/10; still in effect for Delaware)

- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.

Code 948, MAILING OR ADDRESSING COMPANY

- Does the insured provide mailing services, such as addressing and labeling, for unrelated concerns?
- Does the insured provide a mail sorting service?
- Does the insured perform any printing of advertising materials? If so, are all these materials used in the mailing operations, or will the insured provide printing as a separate and distinct operation?
- Are there separate crews for the various operations (if more than one exists)?

Code 949, EMPLOYMENT CONTRACTOR – TEMPORARY MARKETING

For guidance, consult the Rulings & Interpretations - Section 5 of the Manual.

- Are employees provided on a temporary basis to solve the clients’ short term staffing needs?
- List the insured’s clients by name and town/city in which located and advise of the field of business of each client listed (note – while you should verify if the insured provides temporary clerical staffing, there’s no need to include client names for which the only exposure is temporary clerical work).
- Does insured provide temporary medical staffing to hospitals, nursing homes, medical practices, etc., or does insured provide support staff (such as maintenance, laundry and dietary workers) to such facilities?
- Does the insured recruit and train its employees?
- Are the employees assigned to the clients for an indefinite period of time or is a specific time period established before employment begins?
- How long does employment typically last: weeks, months, up to a year or over a year (and specify for which clients employees have been placed for a year or longer)?
- Who determines which individual employees will be assigned to the clients - the insured or the insured’s clients?
- Can the insured change the employee assignments during the terms of the contracts?
- Who is the actual source of funds to meet payroll, tax and insurance obligations – the insured or the insured’s clients?
- Is the insured an employee leasing company (a/k/a a PEO), whereby the insured would take on all, or virtually all, of the employees of the client companies as its own?
- Attach a blank (sample) contract.

Code 951, SALESPERSON - OUTSIDE

- Do the employees partially or solely perform their duties outside of the office?
- Describe any inspection services being provided.
• Do the employees who solicit sales outside of the office at customers’ locations also deliver merchandise or products of the insured?

Code 952, OFFICE MACHINE SERVICE
• Does the insured primarily install, service or repair equipment, such as computers or photocopiers?
• Provide the overall business percentages, by income, for the servicing of each type of equipment.
• Provide the overall business percentages, by income, for the servicing/installation of computer hardware versus computer software.
• If the insured operates a store selling computers or other office/electronic machines, advise if sales are made from an inventory and advise if there’s a separate store crew.
• Provide the overall business percentages, by income, for sales of merchandise versus servicing.

Code 953, OFFICE
• Does the insured provide administrative services for unrelated concerns?
• Are any of the insured’s employees performing services outside of the office (how often do they leave the office)?
• Is the insured’s clerical staff separately located from all other operations of the insured?

Code 954, SECURITY AGENCY
• For investigative services:
  o Note the different types of investigative services the insured may offer (e.g., insurance, background checks, missing persons, criminal cases for lawyers, divorce, etc).
  o Does the insured specialize in any type of investigative service? If yes, specify and advise what part of the overall revenue is so developed.
  o Is undercover work performed? If yes, how often will undercover work be performed? If possible give an example of a type of undercover scenario (e.g., in a factory to investigate possible theft or industrial espionage).
  o Does the insured perform surveillance? If yes, how often will surveillance be performed? If possible give an example of a type of surveillance scenario (e.g., checking on insurance claimants).

• For security services:
  o Will the insured perform security services for unrelated businesses? If yes, give a representative listing of the types of customers (e.g., office buildings, retail stores).
  o Does the insured specialize in any particular type of security customer (e.g., retail stores, office buildings, rock concerts, warehouses, construction sites or bodyguards)?
  o Does the insured only provide security services at his place of business for his operations?
  o Do the security guards wear a uniform with the insured’s name clearly indicated thereon?
  o Are the security guards armed or unarmed?
  o Break down the security guard service revenue by armed security guard services in relation to that part which is unarmed security guard services.
  o Which type of customer(s) utilizes armed guards?
  o In the event the insured provides armed and unarmed guards, are there separate armed and unarmed guard staffs?
  o Are the security guards “static” (at one specific location for a set amount of time) or “mobile” (driving or walking from location to location)?

• For automobile repossession:
  o Does the insured perform or also perform automobile repossession work?
  o What part of the insured’s overall revenue is derived from automobile repossession work?
  o Does the insured perform automobile repossession work for banks, insurance companies or what type of customer?
  o Describe in a step-by-step narrative how the insured performs automobile repossession work (e.g., are the repossessed cars towed or driven to the insured’s lot or what type of location).
• **General questions for multiple enterprises, alarm work and “other”:**
  o In the event the insured provides both investigative and security services provide the revenue percentage for each.
  o In the event the insured provides both investigative and security services indicate whether each service is separately staffed or whether employees interchange.
  o Does the insured also install, service and/or repair alarm systems (e.g., fire, burglar)?
  o In the event the reply to General Question 3 is affirmative also note: what part of the insured’s overall revenue is derived from alarm system work, is there a separate alarm staff or do the employees performing the alarm system work interchange with the insured’s investigative and/or security services?
  o In the event the insured provides or also provides any services not covered by any of the questions above provide a detailed description of such services and observe how much of the insured’s overall revenue is so developed.

**Code 955, ENGINEERING CONSULTING FIRM**
The questions below are based upon the premise the employer provides services principally to exclusively for unrelated businesses. In the event you find the services are provided for the business being surveyed or a related business please so indicate. Please also indicate (e.g., for the business being surveyed) whether the employer has any construction or manufacturing operations with particular reference to such being conducted in Pennsylvania. Please further indicate in the event all construction or manufacturing is performed in another state or another country.

• Does the employer perform consulting engineering services for customers in what specialties: civil, chemical, mechanical, electrical, mining, environmental or what other engineering specialty?
• Does the employer perform testing services for customers? Please indicate the types of substances that are tested. Please also indicate the type of setting where the services are being performed (e.g., in a laboratory at the employer’s facility, at customer locations, in the field – a construction site, by a stream). Please list the equipment or instrumentation used to perform the testing.
• Does the testing include testing soil samples? If yes, what part of the samples tested will be obtained and sent to the employer by the customer in relation to that part of the samples obtained by the employer’s staff.
• Does the employer’s obtaining of samples include performing test boring? If yes, what part of the test boring is to obtain soil samples for the employer to test? Please list the equipment used in the test boring by make and model number.
• Please indicate the types of clients or customers (e.g., manufacturers, construction companies, local or state government).
• Does the employer perform surveying?
• Does the employer preserve, restore or perform conservation of art works (e.g., painting, statues), books or other paper documents?
• Does the employer create museum displays? Types?
• Does the employer perform research and development including building product prototypes?
• Does the employer perform computer software consulting/design/installation?
• Does the employer perform any construction work? Does the employer manage or oversee construction projects? If yes, how often will staff be on-site (all day, visits with what frequency – daily, weekly)?
• The employee listing should include the professional (educational) degrees or certifications of staff as warranted along with the listing by job duties and number. Please further indicate interchange between different tasks as warranted.

**Code 956, LAW FIRM**
• Does the insured provide legal services such as the preparation of legal documents and/or representation in court during legal proceedings?
• Are the services provided for unrelated concerns only?

**Code 957, PHYSICIAN OR DENTIST**
• Does the insured primarily provide medical care or mental health care for patients?
• Advise of any licenses held by the insured that were issued by the Commonwealth of Pennsylvania and attach copies of those licenses.
• Do employees have doctorates in medicine or psychiatry or master's degrees in psychology?

**Code 958, REHABILITATION HOSPITAL**
• Does the insured provide any medical services to the clients, through a staff of doctors or nurses (note the qualifications of the medical personal).
• Is all work performed on an outpatient basis?
• Will the insured hospitalize any of the clients?
• How is the insured licensed by the state (provide a copy of the license)?

**Code 959, VETERINARIANS**
• Provide the overall business percentages, by income, for the various services being provided.
• Does the insured provide medical services for animals?
• Does the insured operate a kennel?
• Does insured raise worms or bees?
• Is the insured a contractor, tattooing livestock or vaccinating, debeaking and desexing poultry?
• Is the insured primarily a pet-sitter?

**Code 960, NURSING AND CONVALESCENT HOME**
• How is the insured licensed by the state? List each different or type of license issued, the issuing department of the state government and the maximum number of beds authorized by each license. Attach a copy of each license if you can.
• How many unlicensed beds does the insured have (apartments, cottages)?
• Separately discuss/describe by each type of license and also for the unlicensed facilities (if any) the services offered by the insured to the guests.
• Do all guests reside and are all services provided in a single building or two or more buildings? If there are two or more buildings, then observe the physical distance between each. Note the number of beds and their type of license by building.
• If there are two or more buildings list employees by the building they work in. Also advise whether there is one a single staff for the entire facility or separate staffs for each building for the following services: dietary (food preparation), laundry, building maintenance and/or grounds maintenance?

**Code 961, HOSPITAL**
• Does the insured operate a hospital?
• Does the insured provide in-patient medical care for patients (list the services provided)?
• Does the insured provide x-ray or other diagnostic testing at your facility?
• Does the insured operate a lab to perform clinical testing at your facility?
• Does the insured have surgical facilities on the premises?
• How is the insured licensed by the state (provide a copy of the license)?

**Code 962, ACCOUNTING OR AUDITING FIRM**
• Is the insured primarily an accounting or auditing firm?
• Is the insured a tax preparation firm?
• Does the insured prepare financial statements (e.g., tax report or audits) for unrelated concerns, or is this work performed for the insured's organization only?
• Does the insured operate as a payroll service or other bookkeeping service?
• Does the insured primarily perform computer software consulting/design/installation for unrelated customers?

**Code 963, CHURCH**
• Does the insured operate a place of worship for religious services?
• If the insured operates a school, note the days and hours of operation and the ages of the children.
• Does the insured offer day care service or operate a pre-school on the premises?
• If the insured operates a school and more than one type of school/educational program is provided at the same location/campus, provide the overall business percentages for each program.
• Does the insured operate/maintain a cemetery, using a separate crew?

Code 964, SHELTERED WORK SHOPS
A sheltered workshop may be a stand alone enterprise or a part of a multiple social service enterprise. A sheltered workshop employs persons who are physically or mentally challenged.
• Please verify that the establishment has been certified as a sheltered workshop by the Wage and Hour Division, Employment Standards Administration of the US Department of Labor.
• Do any of the workshop's staff “graduate” to “regular” employment (e. g., a McDonald's franchise)? Does the workshop also employ job trainers, coaches or placement staff who will work with the person at their new job? How long does the “coach” accompany the person to his/her new job?
• When the employer has additional programs/operations, please make certain that you account for each program/operation and indicate which program(s) are separately staffed or personnel interchange between which programs/operations as warranted.
• When the employer has additional programs/operations make certain that you specify the precise location where each program is operated.
• Please also indicate whether clients may participate in two or more programs (also indicating which programs) and those programs utilized by a different group(s) of clients.
• Please indicate the Commonwealth licensing of which additional programs, if any. Please keep in mind residential programs tend to be licensed, but that the licensing per residential or non-residential program may be different. Please ask for a photocopy of each Commonwealth license and submit with the report.

To assist the field representative in organizing the report (and the analyst in reading it) the following recommendations are made:
• The field representative is urged to draft separate reports by location or by program.
• The field representative should observe whether the building at the location being reported is single story or how many stories the building may have (or how many stories of the multi-story structure the employer occupies).
• In the event two or more programs are conducted at a single location a single report for that location may be drafted that identifies each program, and then use at least a separate paragraph to describe each program. Please follow that procedure for all programs at that location.
• Each program’s descriptive paragraph should also observe whether the program is conducted in a physically separate work area and how the physical separation is achieved (e. g., a separate floor, an area on the same floor separated by floor to ceiling partitions). Please also keep in mind the above general questions with regard to separate or interchanging staff and/or clients and licensing.
• The employee list should be broken down by program, identifying the program.

Code 965, COLLEGE OR SCHOOL, NOC
• What type of educational program/services is offered by the employer (e.g., child day care, nursery school and/or kindergarten, kindergarten through what elementary or which higher school grade, a two year community college, a four year college/university, a trade/vocational school)?
• If the employer offers more than one type of educational program at the same location/campus, please provide a breakdown of business percentages and a head count of students for each program.
• Do the employer’s operations also include on-site residential facilities for the students?
• Does the employer provide educational services/training to one or more of the following student groups: students who are intellectually disabled, students with physical disabilities, adjudicated juvenile delinquents or emotionally disturbed children?
• Describe the school’s curriculum.
• If the employer provides educational or vocational training or apprenticeship programs, describe the field in which these programs are offered (e. g., plumbing, hairdressing)?
• Is the employer a specialist business principally engaged in offering/providing lessons in a single field of interest such as dance, music, gymnastics, karate or what other area?
• If you find the employer provides religious instruction, please advise whether this program is provided in connection with the operation of a church, mosque or synagogue.
• How is the employer licensed by the Commonwealth? Please provide a copy of the license(s).
Code 966, TELEVISION, VIDEO, AUDIO OR RADIO EQUIPMENT SERVICE OR REPAIR
- Does the insured provide service or repair of electronic equipment?
- List, by type and percentage, the equipment serviced/repaired by the insured.
- Does the insured operate a store and is it open to the general public for the purchase of displayed merchandise?
- Does the insured maintain separate crews for the service/repair operation and the store?

Code 967, THEATERS
- Does the insured produce live theatrical productions?
- What types of entertainment services does the insured provide?
- If the insured rents the facility to unrelated theatrical companies, does it provide any employees such as ticket sellers or concession stand personnel?

Code 968, AMUSEMENT, INDOOR
- Does the insured operate an indoor or outdoor amusement facility (if both, provide the overall business percentages for each)?
- Does the insured operate any type of sports training facility?
- If insured is a bowling alley with a restaurant/lounge/bar, provide the overall business percentages for the bowling alley (and incidental snack bar) versus the restaurant/lounge/bar, advise if they are they separately staffed and physically separate and as, needed, ask the standard questions for Codes 897, 899 and 975.

Code 969, AMUSEMENT, OUTDOOR
- Does the insured operate an indoor or outdoor amusement facility (if both, provide the overall business percentages for each)?
- Is the insured’s operation permanently sited, or will the insured travel to different locations?
- Does the insured operate separately located and staffed restaurants, food stands or snack bars?
- Does the insured operate a separately located and staffed gift shop or a souvenir shop?

Code 970, ATHLETIC TEAM
- Does the insured own or operate a sporting franchise?
- Is the franchise for a contact sport (such as football, hockey, lacrosse or roller derby) or a non-contact sport (such as baseball, basketball or soccer)?
- Does the insured own or maintain the building housing the sporting events?

Code 971, COMMERCIAL BUILDINGS
- Describe the insured’s typical customers/client/resident.
- If the insured operates apartment houses and/or condominium complexes and also operations commercial properties, provide the overall business percentages for each of those two exposures and advise if there are separate crews for each.
- If the insured operates an apartment house, cooperative, condominium complex or commercial building, note if the building is age restricted, resident-wise and note the number of units/floors, specify the maintenance or other services performed by employees and those maintenance services that are typically outsourced to unrelated concerns. Are any beds licensed for personal care services?
- If the insured is principally engaged as an exterminator and/or a fumigating or termite control contractor depict each type of activity in a separate paragraph and note the sales percentages. For a fumigating contractor attempt to note the type(s) of poisonous chemicals used.
- For a specialist cleaning contractor specify whether the insured is principally engaged in cleaning any of the following, describe the operations in a step-by-step narrative and provide the relevant business percentage(s):
  - cleaning of grease exhaust, air conditioning, heating or ventilating ducts,
  - sweeping parking lots,
  - cleaning chimneys,
  - waxing or polishing floors, cleaning or washing interior walls,
Standard Survey Instructions

- cleaning, sanitizing or deodorizing restrooms
- performing fire, smoke and/or water damage clean-up (including carpet cleaning).
- cleaning swimming pools - note whether the services include pool opening, filter cleaning and pool closing in addition to pool cleaning
- polishing brass or other metal trim around the doorways or windows of commercial buildings.
- window cleaning – note the technique used and to what height the insured will work.

- For a contractor principally engaged cleaning homes/houses provide a listing of the cleaning services provided. Specify if the insured performs post-construction clean up of new homes.
- If the insured cleans homes/houses and also cleans commercial properties, note the types of commercial properties and note the business percentages for the home/house cleaning versus commercial properties cleaning. Is there a separate crew for each of those exposures?
- If the insured conducts a self-storage business note the total square or cubic feet of available storage space.
- For a homeowners association, note the total acreage, list the amenities (ex. swimming pool, stables etc.) the number of houses, the services provided by the Association’s employees and the services outsourced to unrelated concerns.
- If the insured is a commercial building cleaning/janitorial services contractor note the types of cleaning services in the insured’s repertoire.
- If the insured operates a mobile home or trailer park specify the maintenance tasks typically performed by the employees and those maintenance tasks that are typically outsourced to unrelated businesses. Also, note the park’s acreage and the number of trailer slots.
- Does the insured primarily rent space to “flea markets” or to “swap meets?” Specify the building maintenance tasks that are performed by the insured’s staff and tasks outsourced to unrelated businesses.
- There are certain insureds using Code 971 whose payroll is primarily assigned to either Code 951 or to Code 953, with Code 971 being assigned to the building maintenance staff. The types of businesses contemplated by this question may include but are not necessarily limited to: corporate headquarters of large companies, real estate firms, etc. If this insured is such a company, be specific regarding the insured’s field of business.

Code 972, ATTENDANT CARE

This classification applies only to an individual recipient of Attendant Care services. For a commercial business that provides attendant care or other home care services to unrelated clients in the clients’ homes, please see Codes 942 and 943.

- Is the insured an individual receiving attendant care services and who is considered to be the employer of their caregiver?
- Does the employer receive state or federal assistance to fund the attendant care services that they receive?

Code 973, HOTEL

- How many rooms and/or suites are available for rent at the insured’s facility?
- Also note the number of banquet rooms (if any), meeting rooms and other similar facilities along with their guest/seating capacity.
- How long is the typical patron’s stay (e.g., overnight, several days, a week, two weeks)?
- Does the insured also operate a prepared food service and/or the sale of alcoholic beverages by the drink? If yes, is each separately staffed and are they in a physical separate work area?
- What meals does the prepared food service offer? Is there a hostess, a menu that is handed to the patron to peruse and wait service? If not then describe how is the food service organized?
• Does the facility offer food service for patrons holding day long meetings? If yes, then how is this organized? Is it buffet style?
• Does the facility’s food service consist solely of a continental style breakfast where prepackaged, precooked food may be heated in a microwave and set out along with cold prepackaged cereal, milk, bread and one or more toasters, orange juice and coffee? Does the food service also include a buffet style dinner of prepackaged and precooked foods that may be heated in a microwave? Are alcoholic beverages (e.g., wine, beer) also set out for the dinner in bottles or pitchers?
• Are there a separate banquet room(s) food preparation and/or serving staffs?
• Note the revenue percentages for room rental, food service and the sale of alcoholic beverages by the drink. Note where you have included banquet revenue.
• Is this a facility providing lodging to families of hospitalized children (e.g., a Ronald McDonald House)?

Code 974, RETIREMENT OR LIFE CARE COMMUNITY
• How is the insured licensed by the state? list each different or type of license issued and the issuing department of the state government and the maximum number of beds authorized by each license. Attach a copy of each license if you can.
• How many unlicensed beds does the insured have (apartments, cottages)?
• Separately discuss/describe by each type of license and also for the unlicensed facilities (if any) the services offered by the insured to the guests.
• Do all guests reside and are all services provided in a single building or two or more buildings? If there are two or more buildings, then observe the physical distance between each. Note the number of beds and their type of license by building.
• If there are two or more buildings list employees by the building they work in. Also advise whether there is one a single staff for the entire facility or separate staffs for each building for the following services: dietary (food preparation), laundry, building maintenance and/or grounds maintenance?

Code 975, RESTAURANT, NOC
• Is the insured engaged in the sale of prepared food items?
• List the items prepared/sold by the insured (if possible, attach a copy of the menu).
• What is the insured’s seating capacity?
• Does the insured utilize a wait staff that takes orders and serves the food items/beverages to the customers?
• If the insured engages in the sale of alcoholic beverages by the individual drink, provide the percentage of the insured’s overall revenue generated by the sale of alcoholic beverages versus food and non-alcoholic beverages.
• Does the employer operate a brewpub, microbrewery, gastropub, etc. that brews beer on the premises? If so, what percentage of beer brewed on the premises is sold for on-site consumption versus distributed to other concerns, typically bars, or restaurants?

Code 976, Y.M.C.A., Y.W.C.A.
• Does the insured operate a YMCA/YWCA or community center?
• List the services and activities provided in conjunction with this endeavor (i.e. food service, social/education programs, sports, dances, etc.).
• For what types of “clients” or participants are the insured’s services provided?
• If the insured operates a residential facility, what is the maximum capacity of the insured’s residential facility?
• Who typically stays at the insured’s residential facility and how long is the typical stay?

Code 977, BARBER SHOP, BEAUTY PARLOR OR HAIR STYLING SALON
• Is the insured operating a barber shop or beauty/hair-styling salon?
• List the services offered by the insured.
• Does the insured operate a tanning salon, massage or tattoo parlor or a day spa (with facials, massages, pedicures etc.)?
Code 978, CAMPS, SUMMER OR WINTER
- Provide the address of each of the insured’s camps.
- Does the insured primarily operate a day or overnight camp for children?
- Does the insured primarily operate a campsite, where the general public rents space for its campers/trailers?
- What are the operating dates and times of the insured’s camps?
- Who is the typical camp patron (what are the minimum and maximum ages of the campers)?
- List the activities/amenities offered in conjunction with the insured’s camp.
- Does the insured have a crew of clerical/administrative employees performing duties at a location separate from the camping facilities (if so, provide the address of the clerical/administrative office).

Code 979, RESIDENTIAL FACILITY FOR THE ELDERLY – NON-MEDICAL
- How is the insured licensed by the state (provide a copy of the license)?
- List the types of living quarters offered at the insured’s facility (apartments, cottages, etc.).
- List the services offered by the insured in conjunction with this facility (i.e. housekeeping, laundry, dietary, recreation/social programs).
- Does the insured have a common dining area for all residents?
- Does the insured perform cleaning services for the individual living areas?
- Does the insured offer personal care and/or medical services to their residents? If so, list and describe the personal care/medical services the insured provides.
- Briefly describe the typical resident of the insured’s facility (i.e. age, disabilities, health concerns, etc.).
- What is the maximum capacity of the insured’s facility by type of licensed and/or non-licensed bed?

Code 980, CITY, TOWNSHIP
- Identify the type of municipal government the insured may be: borough, city, county, town or township.
- Does the insured have a salaried police department, a volunteer or salaried fire department, a volunteer or salaried ambulance corps or a volunteer hazardous materials response team? In the event the fire department or ambulance corps is a mix of salaried personnel and salaried staff, note the number of volunteers in addition to separately listing the salaried staff.
- The definition of Code 980 in Section 2 of the separate DCRB/PCRB Manuals lists a number of operations that may be conducted by a municipal government that must be separately classified. Note whether the insured also operates facilities such as golf course/country club, a health club, a nursing home, a museum or public library. Note their name, location and whether these additional facilities separately staffed?
- Does the insured accept the services of persons on public assistance as a part of the Workfare/Community Work Experience Program (CWEP) that have been delegated to the insured by the Department of Public Welfare?
- Has the insured created municipal authorities for water/sewage, housing, etc? Identify the type of authority, its name and whether it is separately staffed.

Code 981, SLOT MACHINE GAMBLING
- Note the number of slot machines the insured may operate.
- Breakdown the insured’s overall revenue percentages for slot machine gambling in relation to other business activities such as horse racing or the operation of a year-round resort hotel.
- Does the insured operate restaurants, bars or gift shops within the area designated for slot machine gambling?
- Does the insured also operate restaurants, bars or gift shops outside of the area designated for slot machine gambling? If yes, are these facilities separately staffed?
- Confirm there is a separate/dedicated staff for all activities within the area designated for slot machine gambling.
- Refer to the standard Code 969 or Code 973 survey questions as warranted for the non-slot machine gambling operations.

Code 982, WORKFARE PROGRAM EMPLOYEES (PA only)
• Is the insured participating in the Workfare/Community Work Experience Program (CWEP) that “employs” recipients of public assistance that have been delegated to the insured by the Department of Public Welfare?
• What is the field of business for the insured that is utilizing the Workfare/CWEP employees?
• List the duties typically performed by the Workfare/CWEP employees.

**Code 983, HOUSING AUTHORITY**
• Does the insured primarily operate as a housing authority?
• List the services provided by the insured (i.e. maintenance, security, management, recreation, etc.).
• For who are the insured’s services performed?
• Describe any construction and/or demolition work being performed by the insured.
• Are the construction/demolition activities performed by the insured’s employees or by unrelated subcontractors?

**Code 984, INSURANCE COMPANY**
• Is insured chartered under state law to write insurance policies?
• Is insured an insurance agency?
• Is insured a contractor providing services (such as auditing or adjusting) to the insurance industry?

**Code 985, POLICE OR FIREFIGHTERS, SALARIED**
• Is the insured a municipal organization that operates a police department?
• Does the insured operate a fire company with paid fire fighters?
• List the number of salaried/paid fire fighters employed by the insured.
• Is the insured primarily a contractor operating a prison/correctional institution?
• Does the insured primarily provide guards and/or security personnel at prisons and correctional institutions operated by unrelated concerns?
• If the insured employs uniformed personnel other than police, paid fire fighters and guards at prisons, list the other uniformed personnel employed and be sure to describe the duties of these individuals.

**Code 986, SHELTER OR HALFWAY HOUSE – RESIDENTIAL – NON-MEDICAL**
• Describe the type(s) of residential facility (e.g. halfway house for prison release, drug or alcohol halfway house, homeless shelter, domestic abuse shelter, maternity home for expecting mothers) operated by the insured. List the addresses of additional facilities or locations.
• Describe the typical residents or clientele at each type of facility.
• What are the operating days and hours of the facility? Does the facility provide 24/7 care or supervision?
• List any state issued licenses (if any) held by the insured for both their residential and any non-residential programs and note the issuing agency. If at all possible, provide a copy of each license.
• Please use a separate paragraph to describe any programs or services offered to the residents. Such services may include but are not limited to childcare, counseling, medical care or therapy (e.g. physical, occupational, speech), educational programs, job training, and advocacy services. Describe the duties of the insured’s staff in these programs.
• Provide a general description of the typical process by which the individual is admitted into the facility and progresses through the treatment programs and to eventual discharge from the facility. For the residents “graduating” from this facility what type of residence might they progress to upon leaving (e.g., an apartment or identify any other type of facility)?
• How long will a resident typically reside at the facility?
• Is there a limit on how long a resident may stay at the facility? If yes, what is it?

**Code 987, CHECK CASHING SERVICES (PA only)**
• Does the insured primarily provide check-cashing services?
• Does the insured provide other services in conjunction with the check cashing (i.e. money orders, wire transfers, sale of lottery tickets/transit tokens/stamps, etc.)?
• What percentage of the insured’s overall revenue is generated by the check cashing service?
Code 988, BANK (DE – includes check cashing agencies)
- Is the insured primarily a bank, credit union or savings & loan?
- Do the insured’s services include checking and/or savings accounts?
- Does the insured offer certificates of deposit?
- List the types of services the insured offers other than checking/saving accounts (i.e. loans, mortgages, etc.)?

Code 991, ATHLETIC TEAM – NON-CONTACT SPORTS (DE only)
- Does the insured own or operate a sporting franchise?
- Is the franchise for a contact sport (such as football, hockey, lacrosse or roller derby) or a non-contact sport (such as baseball, basketball or soccer)?
- Does the insured own or maintain the building housing the sporting events?

Code 992, SANITATION COMPANY
- Is the insured primarily a septic tank or cesspool cleaning contractor?
- Is the insured engaged in the leasing, servicing and/or cleaning of portable toilets?
- For whom are the septic tank/cesspool cleaning/portable toilet services provided?
- List the equipment/machinery used in conjunction with this endeavor.

Code 993, VOLUNTEER AMBULANCE CORPS.
- Is this organization a municipality that operates a volunteer ambulance company?
- List the services provided by the volunteer ambulance company.
- Provide the number of the volunteer ambulance locations within the municipality.
- Does the ambulance company have both volunteer members and paid staff? If yes, provide the current number of volunteer members and the current number of paid staff.
- Does the volunteer ambulance company also operate a social club/hall?

Code 994, VOLUNTEER FIRE COMPANY
- Is this organization a municipality that operates a volunteer fire company?
- List the services provided by the volunteer fire company.
- Does the volunteer fire company also provide an ambulance service?
- What percentage of the municipality’s population is serviced by the volunteer fire department?
- If the volunteer fire department provides fire protection and/or other services outside its own municipality, provide the names of the other municipalities and the percentages of outside area’s populations that are being serviced.
- If the municipality employs salaried/paid fire fighters, provide the number of paid fire fighters and the number of volunteer fire fighters.
- Does the volunteer fire company operate a social club/hall?

Code 995, RUBBISH OR GARBAGE REMOVAL
- Is the insured primarily a trash collection contractor?
- Does the insured operate a landfill and/or incineration plant in conjunction with the trash collection service?
- If the insured performs environmental clean-up services, describe the clean-up work typically performed by the insured.
- Is the insured engaged in street sweeping and/or cleaning services?
- If the insured engages in sewer, water main or tank cleaning services, describe that work in detail.
- For who are the insured’s services provided?
- List the equipment and machinery used by the insured in conjunction with this endeavor?

Code 996, VOLUNTEER HAZMAT TEAM
- If this organization is a municipality that operates a volunteer hazardous materials response team, list the services provided by the volunteer response team.
- List the types of spills/accidents for which the volunteer hazardous materials response team is utilized.
• How many hazardous materials response teams does the municipality have?

**Code 997, UNDETTAKERS**
• Does the insured primarily operate a funeral home and/or crematory.
• List the services provided by the insured.

**Code 999, CEMETERY**
• Does the insured primarily operate a cemetery?
• Does the cemetery continue to provide burial services or is the cemetery “closed” to new burials?
• List the duties typically performed by the cemetery employees.
• Does the insured operate a cemetery in conjunction with a church?

**Code 0006, FIELD CROP OR VEGETABLE FARM**
• List the crops grown by acreage.
• What percentage of the field crops raised is used as feed for the insured’s own animals (versus crops sold to unrelated customers)?
• Provide the percentage of revenue attributable to the raising of each type of field crop and the raising of each type of animal.

**Code 0008, MUSHROOM RAISING**
• List the crops grown by acreage.
• What percentage of the field crops raised is used as feed for the insured’s own animals (versus crops sold to unrelated customers)?
• Provide the percentage of revenue attributable to the raising of each type of field crop and the raising of each type of animal.
• If the insured performs canning operations, describe.
• Does a separate crew of employees perform the canning operations?

**Code 0011, FLOWER RAISING**
• List the crops grown by acreage.
• What percentage of the field crops raised is used as feed for the insured’s own animals (versus crops sold to unrelated customers)?
• Provide the percentage of revenue attributable to the raising of each type of field crop and the raising of each type of animal.
• If the insured grows flowers, either in fields or under glass, describe that exposure.
• If the insured grows, raises or cultivates plants, provide the percentage of revenue that is attributable to the raising of indoor decorative plants versus outdoor bedding plants.
• If the insured operates a store or outlet on the premises, describe and provide the types of merchandise sold in the store or outlet by percentage and advise if the store or outlet operated by a separate crew of employees.
• Does the insured operate a medical marijuana growing facility? If yes, describe.
• If the insured does operate a medical marijuana growing facility, describe any processing performed by the insured after it is harvested (e.g., clipping of leaves, producing tinctures, capsules, etc.) and note if the processing is performed by separate staff in separate work areas.
• If the insured does operate a medical marijuana growing facility, does the insured also operate a medical marijuana dispensary in Pennsylvania? If yes, provide the types of merchandise sold by percentage and note the form in which the products are sold (e.g., leaves for smoking, capsules, tinctures, etc.) in the dispensary. Also note if the dispensary is operated at a separate location or physically separate work area and is separately staffed.

**Code 0013, NURSERY**
• Provide the overall business percentages, by income, for the various services being offered.
• Does the insured grow trees, shrubs or plants either in greenhouses or in fields? Note the number of greenhouses and/or acreage. Specify if the insured’s effort is principally Christmas tree growing.
• If the insured grows, raises or cultivates plants, provide the percentage of revenue that is attributable to the raising of indoor decorative plants versus outdoor bedding plants.
• Does the insured also operate a “garden center(s)” contiguous to the nursery and/or at a separate location? Give a representative listing of the “garden center” merchandise, note whether there’s a separate/dedicated staff working exclusively in the garden center and provide the percentages for sales to landscaping contractors versus to homeowners.
• Does the insured install artificial turf? If yes, will the employees prepare the ground surface for the artificial turf installation or will this part be outsourced.

**Code 0016, ORCHARD**
• List the crops grown by acreage.
• What percentage of the field crops raised is used as feed for the insured’s own animals (versus crops sold to unrelated customers)?
• Provide the percentage of revenue attributable to the raising of each type of field crop and the raising of each type of animal.
• If the insured makes wine, apple juice or other similar products, describe and provide the types of products made by percentage.
• Does the insured use a separate crew to make the wine, apple juice or other products?

**Code 0034, ANIMAL RAISING**
• List the crops grown by acreage.
• What percentage of the field crops raised is used as feed for the insured’s own animals (versus crops sold to unrelated customers)?
• Provide the percentage of revenue attributable to the raising of each type of field crop and the raising of each type of animal.
• If the insured performs poultry, hog or calf dressing operations, describe in detail and provide the percentage of revenue attributable to each type of dressing operation.
• Does the insured use separate crews to perform the poultry, hog and/or calf dressing operations?

**Code 0036, DAIRY FARM**
• List the crops grown by acreage.
• What percentage of the field crops raised is used as feed for the insured’s own animals (versus crops sold to unrelated customers)?
• Provide the percentage of revenue attributable to the raising of each type of field crop and the raising of each type of animal.
• If the insured operates a milk processing plant, describe it and advise if the insured engages a separate crew of employees for this exposure.

**Code 0083, LIVESTOCK**
• List the crops grown by acreage.
• What percentage of the field crops raised is used as feed for the insured’s own animals (versus crops sold to unrelated customers)?
• Provide the percentage of revenue attributable to the raising of each type of field crop and the raising of each type of animal.

**Code 0170, FUR BEARING ANIMAL FARMS (PA Only)**
• List the crops grown by acreage.
• What percentage of the field crops raised is used as feed for the insured’s own animals (versus crops sold to unrelated customers)?
• Provide the percentage of revenue attributable to the raising of each type of field crop and the raising of each type of animal.

**Code 0901, MEMBERS OF RELIGIOUS ORDERS (PA Only)**
• If the insured employs individuals who are members of a religious denomination who have taken a vow of poverty, describe the duties of those individuals.
• Are the individuals in question assigned to perform work in churches, hospitals, schools or other institutions?
• What percentage of the individuals in question performed their services for a period of less than six months during the most recently expired policy period?

**Code 0902, MEMBERS OF RELIGIOUS ORDERS – OCCASIONAL (PA Only)**
• If the insured employs individuals who are members of a religious denomination who have taken a vow of poverty, describe the duties of those individuals.
• Are the individuals in question assigned to perform work in churches, hospitals, schools or other institutions?
• What percentage of the individuals in question performed their services for a period of less than six months during the most recently expired policy period?

**Code 0908, DOMESTIC WORKERS – INSIDE - OCCASIONAL**
• Are the domestics’ duties performed exclusively at a private residence?
• Provide the number of hours worked per week for each domestic employee.
• List the duties of the domestic.
• Advise if the domestics are directly employed/paid by a corporation, partnership, sole proprietorship or private individual.

**Code 0909, DOMESTIC WORKERS – OUTSIDE - OCCASIONAL**
• Are the domestics’ duties performed exclusively at a private residence?
• Provide the number of hours worked per week for each domestic employee.
• List the duties of the domestic.
• Advise if the domestics are directly employed/paid by a corporation, partnership, sole proprietorship or private individual.
• If the domestics work on a farm, describe that operation in detail.
• Is the farm a commercial enterprise, or is it operated solely for the personal use of the insured?

**Code 0912, DOMESTIC WORKERS - OUTSIDE**
• Are the domestics’ duties performed exclusively at a private residence?
• Provide the number of hours worked per week for each domestic employee.
• List the duties of the domestic.
• Advise if the domestics are directly employed/paid by a corporation, partnership, sole proprietorship or private individual.
• If the domestics work on a farm, describe that operation in detail.
• Is the farm a commercial enterprise, or is it operated solely for the personal use of the insured?

**Code 0913, DOMESTIC WORKERS - INSIDE**
• Are the domestics’ duties performed exclusively at a private residence?
• Provide the number of hours worked per week for each domestic employee.
• List the duties of the domestic.
• Advise if the domestics are directly employed/paid by a corporation, partnership, sole proprietorship or private individual.

**Code 4771, EXPLOSIVES MFG. (w/ Code 0771)**
• List and provide percentages for, the raw materials and finished products.
• Does insured engage employees who are exclusively engaged in the delivery of the products?
• If insured also makes blasting agents (ex. anfo), advise if that work is conducted in a physically separate work area (ex. in another building), by a separate staff.

**Code 4775, CARTRIDGE LOADING OR CHARING (w/ Code 0775)**
• List and provide percentages for, the raw materials and finished products.
• Does insured engage employees who are exclusively engaged in the delivery of the products?

**Code 4777, EXPLOSIVES DISTRIBUTOR**

- If insured performs manufacturing or assembling, list, and provide percentages for, the raw materials and finished products.
- Does insured primarily distribute explosives?
- Does insured primarily distribute or exhibit fireworks?

**Code 6824F, BOAT BUILDING OR REPAIR**

- If the insured performs work on navigable waterways or adjoining areas, name the waterways.
- If the insured performs the building, service or repairs of boats, describe that work and note the typical length of the vessels being worked on.

**Code 6826F, MARINA**

- If insured operate a marina, where is it located (at what waterway)?
- Describe any servicing and/or maintenance work performed on recreational boats docked at the marina.
- Note all other amenities offered by the marina such as other recreational facilities, restaurants or hotels.

**Code 6843F, SHIP BUILDING, IRON OR STEEL**

- If the insured performs work on navigable waterways or adjoining areas, name the waterways.
- If the insured performs the building, service or repairs of boats, describe that work and note the typical length of the vessels being worked on.
Code 6872F, SHIP REPAIR OR CONVERSION – ALL OPERATIONS
- If the insured performs work on navigable waterways or adjoining areas, name the waterways.
- Does the insured perform any type of cleaning or other general maintenance for ships?
- Describe all ship repairs being performed.
- If the insured builds ships, describe that exposure.
- Is the insured involved in the painting of hulls?

Code 7309F, STEVEDORING, NOC.
- If the insured performs work on navigable waterways or adjoining areas, name the waterways.
- If the insured loads or unloads ships or barges, describe the methods used.
- List, by type and percentage, the commodities loading/unrelated by the insured.

Code 7313F, COAL DOCK OPERATION AND STEVEDORING
- If the insured performs work on navigable waterways or adjoining areas, name the waterways.
- If the insured loads or unloads ships or barges, describe the methods used.
- List, by type and percentage, the commodities loading/unrelated by the insured.
- If the insured operates a coal or other type of ore dock, describe that exposure.
- Does the insured provide contract stevedoring services to unrelated concerns?

Code 7317F, STEVEDORING – BY HAND OR HAND TRUCK EXCLUSIVELY
- If the insured performs work on navigable waterways or adjoining areas, name the waterways.
- If the insured loads or unloads ships or barges, describe the methods used.
- List, by type and percentage, the commodities loading/unrelated by the insured.
- Does the insured perform any loading or unloading of ship with conveyors, tractors or other mechanical equipment?

Code 7327F, STEVEDORING – CONTAINERIZED FREIGHT
- If the insured performs work on navigable waterways or adjoining areas, name the waterways.
- If the insured loads or unloads ships or barges, describe the methods used.
- List, by type and percentage, the commodities loading/unrelated by the insured.
- Does the insured perform any loading or unloading of ship with conveyors, tractors or other mechanical equipment?
- Does insured also perform over-the-road trucking?

Code 7366F, FREIGHT HANDLERS
- If the insured performs work on any navigable waterways or adjoining areas, name the waterways.
- Does the insured perform any loading or unloading of ships? If so, describe the methods used.
- List by type and percentage the commodities loading/unrelated by the insured.
- Does the insured perform any miscellaneous service at the docks such as checking freight or other processing services?

Code 8709F, STEVEDORING – TALLYMEN AND CHECKING CLERKS
- If the insured performs work on any navigable waterways or adjoining areas, name the waterways.
- Does the insured perform any loading or unloading of ships? If so, describe the methods used.
- Does the insured perform any miscellaneous service at the docks such as checking freight or other processing services?

Code 8726F, STEAMSHIP LINE OR AGENCY – PORT EMPLOYEES
- If the insured performs work on any navigable waterways or adjoining areas, name the waterways.
- Does the insured perform any loading or unloading of ships? If so, describe the methods used.
- Does the insured perform any miscellaneous service at the docks such as checking freight or other processing services?

Code 7405, AIRCRAFT OPERATION (w/ Code 7445)
• Under what part of the Federal Aviation Regulations does the insured operate?
• If insured provides more than one type of aircraft service, provide the overall business percentages for each service and advise if there is a separate crew for each service.
• Does insured engage a separate ground crew?
• Does insured engage ticket sellers or information clerks away from airport locations?

Code 7413, AIRCRAFT OPERATION (w/ Code 7453)
• Under what part of the Federal Aviation Regulations does the insured operate?
• If insured provides more than one type of aircraft service, provide the overall business percentages for each service and advise if there is a separate crew for each service.
• Advise how many round trips are flown between two or more points.
• Is a flight schedule, specifying times and places between which flights are performed, published?
• Does insured engage a separate ground crew?
• Does insured engage ticket sellers or information clerks away from airport locations?

Code 7421, AIRCRAFT OPERATION
• If insured provides more than one type of aircraft service, provide the overall business percentages for each service and advise if there is a separate crew for each service.
• Does insured primarily provide the transport of personnel in the business of an insured not otherwise engaged in aircraft operations?
• Advise of the type of aircraft flown.
• Does insured engage a separate ground crew?
• Does insured engage ticket sellers or information clerks away from airport locations?

Code 7424, AIRCRAFT OPERATION
• If insured provides more than one type of aircraft service, provide the overall business percentages for each service and advise if there is a separate crew for each service.
• Does insured provide a medical air transport service to patients?
• Does insured engage a separate ground crew?
• Does insured engage ticket sellers or information clerks away from airport locations?

Code 7428, AIRPORT OPERATION
• If insured provides more than one type of aircraft service, provide the overall business percentages for each service and advise if there is a separate crew for each service.
• If insured engages flight crew personnel, ask the stock questions for the other aircraft classes.
• Does insured primarily provide the transport of personnel in the business of an insured not otherwise engaged in aircraft operations?
• Does insured primarily engage in the servicing, repairing or re-manufacturing of aircraft?
• Is insured a specialist contractor cleaning aircraft at an airport?