

# CINCINNATI RESIDENTIAL BUILDER'S SUPPLEMENT

(CONTRACTORS SUPPLEMENTAL APPLICATION MI-1360 MUST ALSO BE COMPLETED)

AGENCY: _____  AGENCY CODE: _____	DATE (MM/DD/YY): _____ APPLICANT (First Named Insured): _____
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1. PLEASE COMPLETE BASED ON WORK PERFORMED OVER THE LAST 12 MONTHS:

	NUMBER BUILT ANNUALLY	NUMBER OF UNITS	GENERAL PRICE RANGE
SINGLE FAMILY		N/A	\$
MULTI-FAMILY			\$
CONDO UNITS			\$
TOWNHOUSES			\$
APARTMENTS			\$

2. ANY SPECULATIVE HOME CONSTRUCTION?  YES  NO IF "YES", APPROXIMATE NUMBER OF UNITS ANNUALLY CONSTRUCTED \_\_\_\_\_

3. HAVE MULTI-FAMILY CONSTRUCTION OPERATIONS BEEN PERFORMED IN THE PAST 7 YEARS?  YES  NO  
 IF "YES", DESCRIBE OPERATIONS PERFORMED AND LIST APPROXIMATE DATES: \_\_\_\_\_  
 \_\_\_\_\_

4. DOES THE APPLICANT WORK ON CONVERTED HOUSING (i.e. CONVERTING BUILDINGS INTO HABITATIONAL)?  YES  NO IF "YES", PLEASE EXPLAIN:  
 \_\_\_\_\_  
 \_\_\_\_\_

5. a. DOES THE APPLICANT PROVIDE A WARRANTY?  YES  NO IF "YES", HOW LONG IS IT IN EFFECT? \_\_\_\_\_  
 IS IT THE APPLICANT'S OWN CONTRACTUAL WARRANTY OR ONE PROVIDED THROUGH A THIRD PARTY? \_\_\_\_\_

b. HOW LONG DOES THE APPLICANT RESPOND TO COMPLAINTS? \_\_\_\_\_

c. DOES THE APPLICANT RESPOND TO HOMEBUYERS' COMPLAINTS AFTER THEIR WARRANTY PERIOD?  YES  NO  
 IF "YES", WHAT IS THE MAXIMUM TIME THE APPLICANT WOULD DO THIS? \_\_\_\_\_

d. PLEASE DESCRIBE THE PROCESS BY WHICH THE APPLICANT HANDLES HOMEBUYER COMPLAINTS, INCLUDING DOCUMENTATION AND FOLLOW-UP WITH THE HOMEBUYER. INCLUDE A DESCRIPTION OF THE APPLICANT'S PROCESS WHEN A SUBCONTRACTOR IS NEEDED FOR REPAIRS. PLEASE INCLUDE THE APPLICANT'S FOLLOW-UP PROCEDURE AFTER THE REPAIRS HAVE BEEN MADE:  
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