

**SUPPLEMENTAL STAFFING COMPANY APPLICATION**

Legal Name: \_\_\_\_\_

Type of Placement: Permanent Temporary Temp to Perm

Is there any day labor?  Yes  No - If yes, what % \_\_\_\_\_

Please explain \_\_\_\_\_

Nature of Placement Healthcare Industrial Farm/Agricultural Construction  
 Professional Transportation Hospitality & Food Service  
Other \_\_\_\_\_

Type of Clients providing services to \_\_\_\_\_

Number of Locations \_\_\_\_\_ States with worksite employees \_\_\_\_\_

Form of Recruitment: Newspaper Job Fairs Internet Word of Mouth

Other \_\_\_\_\_

Describe measures taken to evaluate the working environment/Safety practices of client work sites before employees are placed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Describe measures taken to evaluate the working environment/Safety practices should a claim occur:

\_\_\_\_\_  
\_\_\_\_\_

What steps does the insured take if a client's safety performance becomes poor?

\_\_\_\_\_  
\_\_\_\_\_

Do you visit worksites periodically?  Yes  No If yes, how often? \_\_\_\_\_

Do you provide training to the employees being placed? Yes  No

If yes, please explain \_\_\_\_\_

Any employees operating heavy metal machinery such as: punch presses, lathes, saws, drill presses, shears, press brakes or any similar equipment? Yes  No

Are employees advised that they are not to perform any other duties but what they were hired for?  Yes  
 No

Is group transportation provided?  Yes  No  
If yes, please explain \_\_\_\_\_

Is there any USL&H or Federal Act Exposures?  Yes  No  
If yes, please explain \_\_\_\_\_

Do you have a Safety Program in Place?  Yes  No If Yes, please provide copy

Do you perform Background Checks?  Yes  No

If you have driving exposure, please complete the following:  
What is your MVR program? \_\_\_\_\_  
What is your radius of Operations? \_\_\_\_\_  
Who's vehicles are utilized? \_\_\_\_\_

If the staffing company is providing cleaners/debris removal laborers (Code 5610/5613) to construction companies the following should be requested for each job site where the laborers are working:

- Are the cleaners removing debris at sites where building wrecking or demolition is/was being done? Note this includes debris removal from demolition work at sites where remodeling is being done.
- Are the cleaners working at the same time as construction operations are being done?
- Is the total payroll for the cleaners greater than the payroll for all other construction codes (exclude 5606 payroll)? This must be confirmed with client payroll.
- Are the provided cleaning/debris removal employees assisting with construction operations in any way, including delivering materials or equipment, running errands or doing any construction work at the job site?

Please complete pages 3 and 4 providing the following details for your 4 largest clients (client name, description of operations, temp employee duties, class codes, and payroll by class code)

To the best of my knowledge all the information I have given about my business is true and correct.

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**Officer or Owner of business** \_\_\_\_\_ **Date** \_\_\_\_\_  
Please provide the following for your 4 largest clients: *(Attach separate paper if necessary)*

**Client Name** \_\_\_\_\_

Description of operations \_\_\_\_\_

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Temp employee duties \_\_\_\_\_

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Class Codes and payroll by class codes \_\_\_\_\_

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**Client Name** \_\_\_\_\_

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Description of operations \_\_\_\_\_

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Temp employee duties \_\_\_\_\_

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Class Codes and payroll by class codes \_\_\_\_\_

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**Client Name** \_\_\_\_\_

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Description of operations \_\_\_\_\_

Temp employee duties \_\_\_\_\_

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\_\_\_\_\_

Class Codes and payroll by class codes \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Client Name** \_\_\_\_\_

Description of operations \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Temp employee duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Class Codes and payroll by class codes \_\_\_\_\_

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\_\_\_\_\_