



INSURANCE AGENCY, INC.  
 PRIMARY / EXCESS AND SURPLUS LINES BROKERS  
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**WORKERS COMPENSATION BUILDING OPS / JANITORIAL SUPPLEMENT**

Please circle the answer on the following operational questions.

Exterior window cleaning	Yes	No
Fire Damage restoration work	Yes	No
Steam cleaning /other exterior work	Yes	No
Scaffold work	Yes	No
Flue cleaning	Yes	No
Emergency clean up	Yes	No
Exterminators	Yes	No
Specialty Contractors engaged in residential chimney / boiler cleaning	Yes	No

Please describe in detail any “yes” questions and any other detail on the operation that may not be listed above:

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Agent or Insured Signature