

DEFENSE BASE ACT APPLICATION

GENERAL INFORMATION

1.	Name of Organization:	
2.	Years in Business:	
3.	Address:	
4.	Type of Organization: <i>Ind Corporate Partnership Joint Venture LLC Other:</i>	
5.	Contact Name:	
6.	Title:	
7.	E-mail:	
8.	Phone #:	

CONTRACT INFORMATION

9.	Proposed Effective Date:			
10.	Requested quote date:			
11.	Type of Contract(s): <i>DOD DOS FEMA Other:</i>			
12.	Are you the prime contractor on these contracts?	<input type="radio"/> Yes <input type="radio"/> No		
13.	Has organization carried DBA coverage prior?	<input type="radio"/> Yes <input type="radio"/> No		
	Contract Number(s)	Location	Estimated Contract Value	Length of Contract
1.				
2.				
3.				
<i>If more than 3 contracts please include on a separate spreadsheet.</i>				
14.	Description of Operations:			



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OPERATIONS

15.	Any work performed underground, underwater, or above 15 Ft?	<input type="radio"/> Yes <input type="radio"/> No
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If yes, please describe:

16.	If Prime Contractor, are subcontractors used?	<input type="radio"/> Yes <input type="radio"/> No
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If yes, please list subs and describe vetting process:

REMUNERATION / EMPLOYEE INFORMATION

17.	Country(s) of Operation	Job Description	# EEs	Class of EEs (USN, TCN, LN)	Remuneration

Remuneration means all monies paid to employees including without limitation salary, overtime, bonuses and cash allowances.

18.	Do any EEs carry firearms?	<input type="radio"/> Yes <input type="radio"/> No
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If yes, please provide details:

19.	Are tenured employees or new hires utilized for contract?	<input type="radio"/> Yes <input type="radio"/> No
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20.	Will employees have employment with company after contract is complete?	<input type="radio"/> Yes <input type="radio"/> No
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21.	Are physicals provided prior to deployment?	<input type="radio"/> Yes <input type="radio"/> No
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If yes, please describe pre-deployment process:

22.	Is psychiatric pre-screening completed prior to departure?	<input type="radio"/> Yes <input type="radio"/> No
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If yes, who administers:

23.	Are post deployment screenings completed?	<input type="radio"/> Yes <input type="radio"/> No
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If yes, please describe:



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DEPLOYMENT & HOUSING	
24.	Maximum flight concentration to and from contract:
25.	Is all work performed on a military base or embassy? <input type="radio"/> Yes <input type="radio"/> No
<i>If no, please describe where work is performed:</i>	
26.	What type of housing is provided to employees when on contract?
27.	Are employees housed on base? <input type="radio"/> Yes <input type="radio"/> No
<i>If no, how are EEs getting to work location:</i>	
<i>If no, how far is housing location from work:</i>	
<i>If no, what is the maximum concentration of EEs during transportation:</i>	
<i>If no, what security (if any) is provided EEs at housing and during transportation:</i>	
28.	Are EEs provided with non-work related medical insurance? <input type="radio"/> Yes <input type="radio"/> No

FLIGHT CONTRACTORS	
29.	Are you a flight contractor? <input type="radio"/> Yes <input type="radio"/> No
<i>What type of aircraft are you flying:</i>	<i>Number of Pilots and Crew:</i>
<i>If the above aircraft is a helicopter, how many flights per week are being flown:</i>	<i>Where are flights to:</i>
<i>Where are base operation(s) located:</i>	<i>Do you also service the aircraft:</i>

SECURITY CONTRACTORS	
30.	Are you a security contractor? <input type="radio"/> Yes <input type="radio"/> No
<i>Are your EEs armed:</i>	
<i>Where are you providing security (i.e. Base, Embassy, Mobile, other):</i>	
<i>If Mobile, what percentage of the work is mobile security:</i>	
31.	Is body armor required to be worn? <input type="radio"/> Yes <input type="radio"/> No
<i>If yes, please describe what level of body armor and when it is required:</i>	



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LINGUISTIC / TRANSLATOR CONTRACTORS	
32.	Are you a linguistic, translator contractor? <input type="radio"/> Yes <input type="radio"/> No
<i>What type of work is being provided (Transcription, Translation, Interrogation, other):</i>	
33.	Is any work embedded with forward operating units? <input type="radio"/> Yes <input type="radio"/> No
<i>If yes, what percentage of EEs will do off base work:</i>	
34.	Is body armor required to be worn? <input type="radio"/> Yes <input type="radio"/> No
<i>If yes, please describe what level of body armor and when it is required:</i>	
<p><i>Notice to applicants: any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or, conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent act, which is a crime and may subject such person to criminal and civil penalties. NOTICE: This application is for the purpose of obtaining a quotation and does not bind the applicant or the Company to complete the insurance. However, if a policy is later issued, this form shall be the basis of and become part of the contract. The undersigned applicant warrants that to the best of his or her knowledge the statements set forth herein are true. The applicant further warrants that if the information supplied on the application changes between the date of this application and the time when the policy is issued, the applicant will immediately notify the Company in writing of any change, and the insurer may withdraw or modify any outstanding quotations and/or authorization or agreements to bind the insurance.</i></p>	

Signature of Applicant _____

Date _____

Title _____



LIG Marine Managers
 600 1st Ave N Suite 200, St. Petersburg, FL 33701
 (727) 578-2800
SUBMIT@LIGMarine.com
www.LIGMarine.com