



SHELTERED WORKSHOP QUESTIONNAIRE *

1. Applicant's Name: _____
 2. Address: _____

 3. Contact Person: _____
Phone Number: _____
-

OPERATIONS

4. Average number of clients: _____
5. Average number of supervisors: _____
6. Percentage of mentally disabled clients: _____ %
Percentage of physically disabled clients: _____ %
7. Age range of clients: _____
8. Hours of operation: _____ to _____
9. Does workshop furnish transportation: Yes ___ No ___
If yes, describe mode: Bus ___; Van ___; Cars ___;
Other ___ Describe: _____
10. Describe all jobs being performed by the shelter: _____

11. Do these jobs involve any of the following:

- | | |
|---|--|
| <input type="checkbox"/> Power Tool/Power Equipment | <input type="checkbox"/> Electrical Wiring |
| <input type="checkbox"/> Janitorial Services & Equip. | <input type="checkbox"/> Welding |
| <input type="checkbox"/> Woodworking/Pallet Mfg. | <input type="checkbox"/> Heat Sealing |
| <input type="checkbox"/> Plastic Molding | <input type="checkbox"/> Chemicals |
| <input type="checkbox"/> Spray Painting | <input type="checkbox"/> Silk Screening |
| <input type="checkbox"/> Other, describe: _____ | |

If checked, please describe actual operation and related safety and protection measures:

12. Describe any products produced by the organization or for any outside entity: _____

13. Does the workshop contract with the manufacturers for jobs: Yes ___ No ___

If yes:

- a. Does the contract include a hold-harmless clause favoring the workshop?
Yes ___ No ___
- b. Is the workshop named as an additional insured on the manufacturer's policy?
Yes ___ No ___

14. Are clients considered employees? Yes ___ No ___ If yes, are clients covered by Workers' Compensation? Yes ___ No ___

I HEREBY DECLARE TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT ALL OF THE FOREGOING STATEMENTS ARE COMPLETE AND TRUE AND THAT THESE STATEMENTS ARE OFFERED AS AN INDUCEMENT TO THE COMPANY TO ISSUE THE POLICY FOR WHICH I AM APPLYING. IT IS UNDERSTOOD AND AGREED THAT THE COMPLETION OF THIS APPLICATION DOES NOT BIND THE COMPANY.

Signature of Applicant

Title

Date Signed