

BROKER INFORMATION

BROKER	CONTACT PERSON	TEL
<input type="text"/>	<input type="text"/>	<input type="text"/>

Is this account new to your office? Yes No

IF NO, HOW LONG HAVE YOU KNOWN THE APPLICANT?

GENERAL INFORMATION

NAME OF APPLICANT (FULL LEGAL NAME)	NAME OF PRINCIPAL(S)
<input type="text"/>	<input type="text"/>

MAILING ADDRESS	POSTAL CODE
<input type="text"/>	<input type="text"/>

RISK LOCATION ADDRESS	POSTAL CODE
<input type="text"/>	<input type="text"/>

FULL DESCRIPTION OF BUSINESS OPERATIONS

WEBSITE ADDRESS	YEAR BUSINESS ESTABLISHED / EXPERIENCE OF PRINCIPALS
<input type="text"/>	<input type="text"/>

TOTAL NUMBER OF EMPLOYEES	# FULL TIME EMPLOYEES	# PART TIME EMPLOYEES
<input type="text"/>	<input type="text"/>	<input type="text"/>

GROSS RECEIPTS (\$)	IF USA SALES, % OF USA SALES
<input type="text"/>	<input type="text"/>

Any USA sales? Yes No

EFFECTIVE DATE	TARGET PREMIUM (\$)	PREVIOUS INSURER
<input type="text"/>	<input type="text"/>	<input type="text"/>

Has any insurer cancelled, declined or refused the applicant coverage? Yes No

IF YES, PLEASE PROVIDE DETAILS

DESCRIBE INSURED/UNINSURED LOSSES IN THE PAST 5 YEARS (DATE, VALUE BEFORE DEDUCTIBLE) AND ACTIONS TAKEN TO PREVENT RECURRENCE

PROPERTY UNDERWRITING INFORMATION

DISTANCE BETWEEN THE BUILDING AND THE NEAREST MUNICIPAL FIRE HYDRANT

- Within 500 feet
 Between 500 and 1000 feet
 Over 1000 feet

DISTANCE TO THE NEAREST FIRE HALL

CONSTRUCTION CLASS WHICH BEST DESCRIBES THE BUILDING

- Fire Resistive (solid concrete walls, floors, roof, supports)
 Masonry, Non-Combustible (masonry walls; non-combustible floors/roof on protected steel)
 Non-Combustible (non-combustible materials on unprotected steel)
 Masonry (incl. Mill) (>4" masonry walls; wood floors/roof on heavy timber/wood joists/unprotected metal)
 Masonry Veneer (<4" masonry walls; wood floors/roof on wood joists/combustible material)
 Frame (combustible walls, floors, roof on wood/combustible material)
 Other

YEAR BUILT

IF OVER 30 YEARS OLD, PROVIDE DETAILS OF UPDATES

- | | | | |
|------------|---|-------------------------------|----------------------------------|
| Electrical | <input style="width: 100%;" type="text"/> | <input type="checkbox"/> Full | <input type="checkbox"/> Partial |
| Plumbing | <input style="width: 100%;" type="text"/> | <input type="checkbox"/> Full | <input type="checkbox"/> Partial |
| Heating | <input style="width: 100%;" type="text"/> | <input type="checkbox"/> Full | <input type="checkbox"/> Partial |
| Roof | <input style="width: 100%;" type="text"/> | <input type="checkbox"/> Full | <input type="checkbox"/> Partial |

OTHER OCCUPANCIES

ADJACENT EXPOSURES

NUMBER OF STORIES

HEATING TYPE

GENERAL HOUSEKEEPING

TOTAL BUILDING SQ FT

APPLICANT'S SQ FT

BUILDING SPRINKLERED? (Y/N + %)

Is any portion of this building vacant?

- Yes No

Is any portion of this building under renovation?

- Yes No

IF YES, PLEASE EXPLAIN

PROPERTY UNDERWRITING (continued)

BURGLARY ALARM SYSTEM

Monitored Local None

- Is the monitoring company ULC approved? Yes No
- Does the building have a ULC automatic fire extinguishing system (if applicable)? Yes No
- Has the system been independently tested within the past 12 months (if applicable)? Yes No
- Dust collection system (if applicable)? Yes No
- Approved spray booth (if applicable)? Yes No
- Are there any flammable / combustible liquids on the premises? Yes No

IF YES, HOW MUCH AND HOW ARE THEY STORED?

MISCELLANEOUS INFORMATION

CRIME UNDERWRITING INFORMATION (IF APPLICABLE)

HOW MANY EMPLOYEES ROUTINELY HANDLE MONEY?

Is there a safe on the premises? Yes No

IF YES, IS IT ULC APPROVED AND WHAT CLASS?

Does the applicant make daily deposits to the bank? Yes No

COVERAGE REQUIREMENTS (PER LOCATION)

PROPERTY & BUSINESS INTERRUPTION COVERAGES	DEDUCTIBLE	AMOUNT OF INSURANCE
Building	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Equipment incl. Tenants Improvements	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Stock	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Transit	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Business Interruption (Profits)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Business Interruption (Gross Earnings)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Business Interruption (Actual Loss Sustained)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Rent or Rental Value	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Extra Expense	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Office Contents	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Computer (Hardware/Software)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Contractors Equipment Floater	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Tool Floater	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
Other (explain)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

COVERAGE REQUIREMENTS (continued)

CRIME COVERAGES	DEDUCTIBLE	AMOUNT OF INSURANCE
Commercial Blanket Bond		
Broad Form Money and Securities		
Money Orders and Counterfeit Paper Currency		
Depositors Forgery		

OPTIONAL COVERAGES (SELECT ANY REQUIRED)

<input type="checkbox"/> Sewer Backup	DEDUCTIBLE (\$) <input type="text"/>	<input type="checkbox"/> Replacement Cost	<input type="checkbox"/> Property Extension
<input type="checkbox"/> Flood	DEDUCTIBLE (\$) <input type="text"/>	<input type="checkbox"/> Stated Amount Co-Insurance	
<input type="checkbox"/> Earthquake	DEDUCTIBLE (\$) <input type="text"/>	<input type="checkbox"/> By-Laws	

NOTICE TO APPLICANT & DECLARATION
IMPORTANT NOTICE

Consumer and previous insurer reports containing personal, credit, factual or investigative information about the applicant may be sought in connection with this application or any renewal, extension or variation thereof. All provisions in the various forms issued under this contract shall be deemed contained in the present application. The policy may be void and claims denied where the applicant gives false/erroneous information, knowingly misrepresents or fails to disclose any material fact, contravenes a term of the contract, commits fraud, or wilfully makes a false statement in respect of a claim. I/We declare the statements and particulars in this application are true and that I/we have not suppressed or mis-stated any material facts, and agree that should a policy be issued this application shall be the basis of the contract with underwriters.

FULL NAME (PRINT) <input type="text"/>	TITLE / POSITION <input type="text"/>	DATE (MM / DD / YYYY) <input type="text"/>
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SIGNATURE OF AUTHORIZED REPRESENTATIVE