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| COMMERCIAL RENEWAL APPLICATION |

**Broker:**       **Policy#:**       **Expiry Date of Renewal:**

**Named Insured:**

**Change in name? If so, describe in full:**

**Mailing address:**      

**BUILDING INFORMATION:** Year built:      # of Stories:     Sq Footage:

CONSTRUCTION:  Frame  Masonry  Non-Combustible  Fire Resistive  Other *(Describe):*

FOUNDATION:  Concrete/Poured Concrete  Brick  Stone  Post & Pier  Preservative/Treated Lumber  Other *(Describe):*

HEATING:  Natural gas furnace  Hot water boiler  Oil furnace\*  Electric  Woodstove\*  Other *(Describe)*:

\*please attach Questionnaire/Photos

WIRING:  Fuses  Circuit Breakers  60 amp  100 amp  200 amp  Aluminum Wiring  Knob & Tube wiring

PLUMBING: Copper:       % PVC:       % Galvanized:       % Other:       % *Describe*:

UPDATE INFO: Heating:       Electrical:       Plumbing:       Roof:

**FIRE PROTECTION:** Fire hydrant: Within 300m? Yes No Firehall: Within 5m/8km? Yes  **No**  Volunteer  Paid

**PRIVATE PROTECTION:** Fire Extinguishers? Yes No Smoke Detectors? Yes No Monitored Alarm? Yes No

**Any Change in property values?**  Yes No

**Description of operations:**

**# years in operation:**       **Changes in operation?** Yes No **If so, describe in full:**

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| --- | --- | --- |
| Annual Sales | **Expiring Term** | **Next Term** |
| **Canada** |  |  |
| **U.S.A.** |  |  |
| **Foreign (Specify Countries)** |  |  |

**No. of Employees:**       **Gross Annual Payroll : $**

**Cost of Work Sublet : $**

**Coverage: As per expiring policy  or Specify:**

**Limit of Liability: As per expiring policy  or Specify:**

**Describe all losses paid or reserved that occurred or were reported during the past five years:**

**DECLARATION**

I/We declare and warrant that after enquiry all statements and particulars contained in this Proposal and addenda are true and that no information whatsoever has been withheld which might increase the risk of the Underwriters or influence the acceptance of this Proposal and should the above particulars alter in any way I/We will advise Underwriters as soon as practicable. I/We understand that failure to disclose any material facts that would be likely to influence the acceptance and assessment of the Proposal may result in the Underwriters refusing to provide indemnity or voiding the policy in every respect. I/We hereby agree and accept that this Declaration shall be the basis of the contract between both parties if entered into. I/We have been advised by the broker and consent to any information that may be perceived as personal information for collection, appropriate use, and disclosure of to third parties. *Protection and Electronic Documents Act (PIPEDA)*

*(Print Name of Proposed Insured)*

Signature of Insured & Title Date