



Ontario Application for Automobile Insurance Owner's Form (OAF 1)

Policy No. Assigned

21985

| | | | | | |
|---|-------------------------------|---|--|---------------------|---|
| New policy <input checked="" type="checkbox"/> | Replacing Policy No. 21985 | Company bill <input checked="" type="checkbox"/> | Broker/Agent bill <input type="checkbox"/> | Other (specify) | Language Preferred English <input checked="" type="checkbox"/> French <input type="checkbox"/> |
| Insurance Company (Insurer) Gore Mutual Insurance Company 252 Dundas St N P.O. Box 70 Cambridge ON N1R 5T3 | | | Broker/Agent Bill Blaney Insurance Brokers Ltd. 4197 Catherine Street, P.O. Box 100 Dorchester ON, N0L 1G0 Broker Code: 1254 | | |

| | | | |
|--|--|--|--|
| 1 Applicant's Name & Primary Address <small>"Primary Address" means address where applicant normally resides.</small> | | Lessor (if applicable) | |
| Name and Address THORNE PROPERTY MANAGEMENT O/A MARK 1037 FOGERTY ST., LONDON, ON Postal Code N5X 4M2 Phone No. Home (519) 667-4099 Work (519) 660-1904 | | Name and Address HONDA CANADA FINANCE INC 600-175 COMMERCE VALLEY DRIVE WEST THORNHILL, Postal Code L3T 7P6 Phone No. Fax | |

| | | | |
|--|--------------------|-------|--|
| 2 Policy Period (all times are local times at the applicant's address shown above) | | | |
| Effective Date: | Year / Month / Day | Time | am <input checked="" type="checkbox"/> pm <input type="checkbox"/> |
| | 2018 9 27 | 12:01 | |
| Expiry Date: | Year / Month / Day | Time | at 12:01 am |
| | 2019 9 27 | | |

| 3 Described Automobile | | | | | | | | | | | | Each automobile will be used primarily in the vicinity of the applicant's address, unless otherwise stated in Remarks. | | | | | | | | | | | |
|------------------------|---|--|--|------------------------------------|---------------------------------|---|--|----------------------|--|-----|--|--|--|--|--|---|-------|--|--|--|--|--|--|
| Auto No. | Model Year | Make or Trade Name | Model | Body Type | No. of Cylinders or Engine Size | Gross Vehicle Weight (Lbs) (Kg) | | | | | | | | | | | | | | | | | |
| 1. | 2018 | HONDA | ACCORD TOURING 4DR | Private Passenger - 4 Door | 4 | | | | | | | | | | | | | | | | | | |
| 2. | | | | | 0 | | | | | | | | | | | | | | | | | | |
| 3. | | | | | 0 | | | | | | | | | | | | | | | | | | |
| Auto No. | Vehicle Identification No. (Serial No.) | | | | | | | | | | Owned? | Leased? | Purchased/Leased Year Month New? Used? | | Purchase Price (including options & taxes) | Automobile Use (*Give details in Remarks section) | | Business Use % (see Note 1) Farm Comm? | | | | | |
| 1. | 1 H G C V 1 F 9 4 J A 8 1 0 6 0 9 | | | | | | | | | | X | | 18 09 X | | 37,000 | X | 10 km | 70 | | | | | |
| 2. | | | | | | | | | | | | | | | | | km | | | | | | |
| 3. | | | | | | | | | | | | | | | | | km | | | | | | |
| Auto No. | Estimated Annual Driving Distance | Is any automobile used for car pooling? | | Type of Fuel Used | | Unrepaired Damage? | | Modified/Customized? | | | | | | | | | | | | | | | |
| | | If Yes, give no. of Passengers and Details | | Gas Diesel If other, give details: | | (If Yes, give details in Remarks section) | | (See Note 2) | | | | | | | | | | | | | | | |
| 1. | 1200 km | Yes | No <input checked="" type="checkbox"/> | X | | Gasoline | | Yes | No <input checked="" type="checkbox"/> | Yes | No <input checked="" type="checkbox"/> | | | | | | | | | | | | |
| 2. | km | Yes | No <input type="checkbox"/> | | | | | Yes | No <input type="checkbox"/> | Yes | No <input type="checkbox"/> | | | | | | | | | | | | |
| 3. | km | Yes | No <input type="checkbox"/> | | | | | Yes | No <input type="checkbox"/> | Yes | No <input type="checkbox"/> | | | | | | | | | | | | |
| Auto No. | Lienholder Name & Postal Address | | | | | | | | | | | | | | | | | | | | | | |
| 1. | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | | | | | | | | | | |

Is the applicant both the Registered Owner and the Actual Owner of the described automobile(s)? Yes ☒ No ☐ If No, give details in Remarks section.

Will any of the described automobiles be rented or leased to others, or used to carry passengers for compensation or hire, or haul a trailer, or carry explosives or radioactive material? Yes ☐ No ☒

Total number of automobiles in the household or business. 3

| 4 Driver Information - List all drivers of the described automobile(s) in the household or business. | | | | | | | | | | | | | |
|--|---|---|---------------|-------|---|-------------------------------|----------------|-----|---|---------|---|---|---|
| Driver No. | Name as shown on Driver's Licence | Driver's Licence Number | Date of Birth | | | Sex | Marital Status | | | | | | |
| 1. | Size, Mark | S47685211820630 | Year | Month | Day | | | | | | | | |
| | | | 1982 | 6 | 30 | M | M | | | | | | |
| 2. | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | |
| Driver No. | Driver Training Certificate Attached? | Date First Licensed in Canada or U.S. Class (Class G or equivalent) | Year | Month | Other class of licence, if any Class Year Month | Percentage Use by Each Driver | | | Are any other persons in the household or business licensed to drive? | | Do any drivers qualify for Retiree Discount? (see Note 3) | | |
| | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | G | 17 | 12 | G | 02 | 06 | 100 | Auto. 1 | Auto. 2 | Auto. 3 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 2. | Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | | | | | | | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3. | Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | | | | | | | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4. | Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | | | | | | | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Special Notes

Note 1: Business Use % - State the usual percentage of annual driving distance that is for business use. (Enter 0 if there is no business use)

Note 2: Modified/customized includes changes, other than repairs or restorations, that affect the original manufacturer's design specifications or increase the value of the automobile. These may include, but are not limited to: engine modifications; paint changes; non-factory installed wheels, tires and electronic accessories and equipment, etc. If you are insured for "Loss or Damage Coverage", there is a \$1500 limit on non-factory installed electronic accessories and equipment.

Note 3: Retiree Discount - You may be entitled to a discount if you are the principal operator of a described automobile, are retired, have not been employed for 26 weeks or more in the last 52 weeks, do not earn or receive income from any office or employment, are not engaged in any professional occupation and are not operating a business. To qualify, you must be at least age 65, or receiving a pension under the Canada Pension Plan, the Quebec Pension Plan, or a pension registered under the Income Tax Act. If you qualify, your broker or agent will ask you to sign a declaration to confirm this.