



**VACANT PROPERTY  
APPLICATION**

OFFICE USE ONLY:

Office: \_\_\_\_\_ Underwriter: \_\_\_\_\_

**GENERAL QUESTIONS (applicable to all risks submitted)**

1. Name and Address of Applicant:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postal Code: \_\_\_\_\_

2. Address of the Property to be Insured:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postal Code \_\_\_\_\_

3. Distance From Fire Hall/Fire Hydrant: \_\_\_\_\_

4. Construction Type: \_\_\_\_\_

5. Age of Primary Structure:

0 – 15 Years: \_\_\_\_ 15 – 50 Years: \_\_\_\_ Over 50 Years: \_\_\_\_

6. Are there any Outbuildings? Yes: \_\_\_\_ No: \_\_\_\_

If your answer is yes, describe:

\_\_\_\_\_  
\_\_\_\_\_

7. Value to be insured? \_\_\_\_\_

8. Mortgage Balance? \_\_\_\_\_

9. Square Footage? \_\_\_\_\_

10. General condition of the building to be insured:

New: \_\_\_\_ Good: \_\_\_\_ Fair: \_\_\_\_ Poor: \_\_\_\_

11. Description of area where building is located:

Residential: \_\_\_\_ Commercial: \_\_\_\_ Industrial: \_\_\_\_ Other: \_\_\_\_

12. Existing damage to the building? Yes: \_\_\_ No: \_\_\_

If you answer is yes, describe existing damage:

\_\_\_\_\_  
\_\_\_\_\_

13. Is the interior of the building free from refuse, garbage, etc.?

Yes: \_\_\_ No: \_\_\_

14. How often is the building inspected by the applicant or the applicant's representative?

Daily? \_\_\_ Weekly? \_\_\_ Monthly? \_\_\_ Other? \_\_\_

Describe inspections:

\_\_\_\_\_  
\_\_\_\_\_

15. Are utilities in the building operational? Yes: \_\_\_ No: \_\_\_

16. Upgrades in the last 15 years:

Wiring: Yes: \_\_\_ No: \_\_\_

Plumbing: Yes: \_\_\_ No: \_\_\_

Roof: Yes: \_\_\_ No: \_\_\_

17. How long has applicant owned the building to be insured?

Less than one year? \_\_\_ 1 – 5 Years? \_\_\_ Over 5 Years? \_\_\_

18. Prior use of the building when occupied? \_\_\_\_\_

19. Identify all mortgages, lienholders and additional loss payees (if any):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

20. Describe all prior losses and/or claims (if any) for the past three (3) years, including the date of loss, the nature of the loss or occurrence, the status of each loss or claim, the amount of the loss, and whether the damage has been repaired.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

21. Has the applicant been convicted of the crimes of arson or insurance fraud in the past ten (10) year? Yes \_\_\_ No \_\_\_

**ADDITIONAL QUESTIONS – COMMERCIAL PROPERTY**

1. Are there any uncorrected fire code violations at the property to be insured?

Yes \_\_\_ No \_\_\_

If your answer is yes, describe the violation and any corrective actions being taken.

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2. Are any flammable, explosive or hazardous substances present at the property to be insured? Yes \_\_\_ No \_\_\_

If your answer is yes, please identify the substances and describe the storage facilities (e.g. underground tanks, above-ground tanks, etc.).

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3. Are the following safeguards present at the property to be insured and regularly maintained in good working order?

Local Burglar Alarm? Yes \_\_\_ No \_\_\_

Central Station Burglar Alarm? Yes \_\_\_ No \_\_\_

Central Station Fire Alarm? Yes \_\_\_ No \_\_\_

4. Have there been any crime (including vandalism) committed or attempted at the property to be insured in the past three (3) years?

Yes \_\_\_ No \_\_\_

If your answer is yes, please describe.

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5. Are any vehicles, equipment or machinery (whether or not operational) located on the property to be insured? Yes \_\_\_ No \_\_\_

If your answer is yes, please describe.

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**ADDITIONAL QUESTION – COMMERCIAL LIABILITY**

1. Is there a parking lot at the property to be insured? Yes \_\_\_ No \_\_\_

If your answer is yes, is it fenced or posted no trespassing?

Yes \_\_\_ No \_\_\_

What is the size of the parking lot? \_\_\_\_\_

2. Are any swings or other playground equipment present at the property to be insured? Yes \_\_\_ No \_\_\_

3. Is any railroad spur or sidetrack located on the property to be insured?

Yes \_\_\_ No \_\_\_

**RESIDENTIAL LIABILITY RISK QUESTIONS**

1. Are any swings or other playground equipment present at the property to be insured? Yes \_\_\_ No \_\_\_

2. Have there been any crimes (including vandalism) committed or attempted at the property to be insured in the past three (3) years?

Yes \_\_\_ No \_\_\_

If your answer is yes, please describe.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Are any vehicles (whether or not operational) located on the property to be insured? Yes \_\_\_ No \_\_\_

**VACAN LAND ONLY**

1. Size? \_\_\_\_\_ acres

2. Operations on land? \_\_\_\_\_

3. Is land leased to others? \_\_\_\_\_

4. Does applicant allow any recreational organizations to use property? \_\_\_\_\_

5. Ponds, Lakes, Bodies of water? \_\_\_\_\_

**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)*

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*(Print Name of proposed insured)*

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Signature of Insured & Title

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Date

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Signature of Broker

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Date

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Witness

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Date