|  |
| --- |
| **VACANT CONDOMINIUM UNIT OWNERS** –Application for Insurance |

This product is for residential condo units which are vacant.

**Instead of completing this application form, consider trying** [***JET***](http://www.forwardinsurance.ca)**, our self-serve platform.**

[***JET***](http://www.forwardinsurance.ca) **is the quickest path to quotes and policy issuance. A modern way** [**FORWARD**](http://www.forwardinsurance.ca)**.**

**PLEASE READ CAREFULLY** ‐ Please review this application in detail for accuracy.  If there are any misrepresentations or omissions in the application, any insurance quote is deemed to be void, and any subsequent insurance policy will be rendered null and void from inception.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **APPLICANT INFORMATION** | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Applicant Name (legal name): | | | | |  | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | |
|  | Province of primary residence: | | | |  | | | | | | |  | | | | |  |
|  |  | | | |  | | | |  | | |  | | | | |  |
| **INSURANCE & LOSS HISTORY** | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Does the Applicant(s) currently or have they previously held a policy with Forward Insurance Managers Ltd.? | | | | | | | | | | | | | | | | | No  Yes |
|  | | | | | | | | | | | | | | | | |  |
|  | If yes, please provide policy number: | | | | | |  | | | | |  | | | | | |
|  |  | | | | | |  | | | | |  | | | | |  |
| Has insurance ever been cancelled MID-TERM by a carrier (eg. cancelled by registered letter)? | | | | | | | | | | | | | | | | | No  Yes |
|  |  | | | |  | | | |  | | |  | | | | |  |
|  | If yes, describe reason: | | |  | | | | | | | | | | | | | |
|  |  | | |  | | | | | | | | | | | | | |
| Have there been any claims or losses (whether covered by insurance or not) at this location in the past 5 years? | | | | | | | | | | | | | | | | No  Yes | |
|  | | | | | | | | | | | | | | | | | |
| **Claim 1** Details – Date: | | |  | | | | | | | |  | | | | | | |
|  | | |  | | | | | | | | | |  | | | | |
|  | Type of loss: | | | | |  | | | | | | | | | | | |
|  |  | | | | |  | | | | | | | | | | | |
|  | Aircraft or vehicle impact | | | | Arson | | | | | | Burglary | | | | Change in Temperature | | |
|  | Earthquake | | | | Electrical Current | | | | | | Explosion | | | | Falling Object | | |
|  | Fire | | | | Flood | | | | | | Freezing | | | | Hail | | |
|  | Landside | | | | Lightning | | | | | | Malicious Acts | | | | Other-Liability | | |
|  | Overland Water | | | | Riot | | | | | | Sewer Backup | | | | Smoke | | |
|  | Storm | | | | Tenant Vandalism | | | | | | Water | | | | Wildfire | | |
|  | Wind | | | |  | | | | | |  | | | |  | | |
|  | | | | | | | | | | | | | | | | | |
|  | Was damage repaired? | | | | | | | No  Yes | | | Is the claim open or closed?: | | | | Open  Closed | | |
|  |  | | | | | | |  | | | | | | |  | | |
|  | Total Amount (paid or reserve): | | | | | | | $ | | | | | | |  | | |
|  | |  | | | | | | | |  | | | |  | | | |
| **Claim 2** Details – Date: | | |  | | | | | | | |  | | | | | | |
|  | | |  | | | | | | | | | |  | | | | |
|  | Type of loss: | | | | |  | | | | | | | | | | | |
|  |  | | | | |  | | | | | | | | | | | |
|  | Aircraft or vehicle impact | | | | Arson | | | | | | Burglary | | | | Change in Temperature | | |
|  | Earthquake | | | | Electrical Current | | | | | | Explosion | | | | Falling Object | | |
|  | Fire | | | | Flood | | | | | | Freezing | | | | Hail | | |
|  | Landside | | | | Lightning | | | | | | Malicious Acts | | | | Other-Liability | | |
|  | Overland Water | | | | Riot | | | | | | Sewer Backup | | | | Smoke | | |
|  | Storm | | | | Tenant Vandalism | | | | | | Water | | | | Wildfire | | |
|  | Wind | | | |  | | | | | |  | | | |  | | |
|  | | | | | | | | | | | | | | | | | |
|  | Was damage repaired? | | | | | | | No  Yes | | | Is the claim open or closed?: | | | | Open  Closed | | |
|  |  | | | | | | |  | | | | | | |  | | |
|  | Total Amount (paid or reserve): | | | | | | | $ | | | | | | |  | | |
|  | |  | | | | | | | |  | | | |  | | | |
| **Claim 3** Details – Date: | | |  | | | | | | | |  | | | | | | |
|  | | |  | | | | | | | | | |  | | | | |
|  | Type of loss: | | | | |  | | | | | | | | | | | |
|  |  | | | | |  | | | | | | | | | | | |
|  | Aircraft or vehicle impact | | | | Arson | | | | | | Burglary | | | | Change in Temperature | | |
|  | Earthquake | | | | Electrical Current | | | | | | Explosion | | | | Falling Object | | |
|  | Fire | | | | Flood | | | | | | Freezing | | | | Hail | | |
|  | Landside | | | | Lightning | | | | | | Malicious Acts | | | | Other-Liability | | |
|  | Overland Water | | | | Riot | | | | | | Sewer Backup | | | | Smoke | | |
|  | Storm | | | | Tenant Vandalism | | | | | | Water | | | | Wildfire | | |
|  | Wind | | | |  | | | | | |  | | | |  | | |
|  | | | | | | | | | | | | | | | | | |
|  | Was damage repaired? | | | | | | | No  Yes | | | Is the claim open or closed?: | | | | Open  Closed | | |
|  |  | | | | | | |  | | | | | | |  | | |
|  | Total Amount (paid or reserve): | | | | | | | $ | | | | | | |  | | |
|  |  | | | | | | |  | | | | | | |  | | |
| **RISK INFORMATION** | | | | | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **RISK LOCATION** | | | | | | |  | | | | | | | | | | | | |  |  | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | |  |  | | | | | | | | | | |
| Risk location address: | | | | | | |  | | | | | | | | | | | | | | | | | | Unit #: | | | |  | | |
|  | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | |  | | |
| City: | |  | | | | | | | | | | | | | Province: | | | |  | | | | | | | Postal code: | | |  | | |
|  | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | |  | | |
| **WILDFIRE EXPOSURE** | | | | | | | | |  | | | | | | | | | | |  | | | | | | |  | | | | |
|  | | | | |  | | | | | | | | | | | | | | |  | | | | | | |  | | | | |
| Has the risk location ever been evacuated or put on notice of evacuation due to a wildfire or flood? | | | | | | | | | | | | | | | | | | | | | | | | | | | | No  Yes | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Is this risk located within 25kms of a current wildfire? | | | | | | | | | | | | | | | | | | No  Yes | | | | | | | | | | | | | |
|  | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **FLOOD EXPOSURE** | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Is this risk located in an area that is currently under flood warning? | | | | | | | | | | | | | | | | | | | | No  Yes | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Has the risk ever been evacuated or issued an evacuation order or alert, due to flood? | | | | | | | | | | | | | | | | | | | | | | | | No  Yes | | | | | | | |
|  | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **BUILDING INFO** | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Type of building that the unit is located in: | | | | | | | | | | | | | | | Multi-Plex (less than 8 units) | | | | | | | | Duplex | | | | | | | | |
|  | | | | | | | | | | | | | | | Rowhouse/Townhouse | | | | | | | | Low Rise Apartment | | | | | | | | |
|  | | | | | | | | | | | | | | | Highrise Apartment (Concrete) | | | | | | | | Detached/Semi-Detached Single-Family Dwelling | | | | | | | | |
|  | | | | | | | | | | | | | | | Other | | | | | | | |  | | | | | | | | |
|  | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Are there any commercial occupancies in the building? | | | | | | | | | | | | | | | | | | | No  Yes | | | | | | | | | | |  | |
|  | | | | | |  | | | | | | | | | | |  | | | | | |  | | | | | | |  | |
|  | If yes, are there any restaurants in the building? | | | | | | | | | | | | | | | | | | No  Yes | | | | | | | | | | |  | |
|  |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | |
|  | Are there any industrial/manufacturing, or automotive related occupancies in the building? | | | | | | | | | | | | | | | | | | | | | | | | | | No  Yes | | | | |
|  | | | | | |  | | | | | | | | | | |  | | | | | |  | | | | | | |  | |
|  | | | If yes, describe: | | | | |  | | | | | | | | | | | | | | |  | | | | | | |  | |
|  | | | | | |  | | | | | | | | | | |  | | | | | |  | | | | | | |  | |
| Type of construction: | | | | | | Wood frame | | | | | | | | | | Concrete Block/Masonary | | | | | | | Log | | | | | | | Fire Resistive | |
|  | | | | | | Clay | | | | | | | | | | Straw | | | | | | | Modular/Prefab | | | | | | | Other | |
|  | | | | | |  | | | | | | | | | | |  | | | | | |  | | | | | | |  | |
| Year built: | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Will there be any construction or renovation activity on the premises during the next 12 months? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | No  Yes | |
|  | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | If yes, please check all that apply: | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Basement finishing/reno | | | | | | | | | | | | | | | | | Kitchen, bathroom reno | | | | | | | | | Addition to overall footprint | | | | |
|  | Raising home or addition of level | | | | | | | | | | | | | | | | | Finishing garage to living space | | | | | | | | | Maintenance – windows, roof, siding | | | | |
|  | Repairing property damage from an incident | | | | | | | | | | | | | | | | | Foundation – reno/replace | | | | | | | | | Complete house remodel | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cost of renovations: | | | | | | | | | | $ | | | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | |
| Will there be any structural renovations (e.g. adding or removing walls)? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | No  Yes | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | |
|  | | | | If yes, describe: | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | |
| **VACANCY DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | |
| Vacancy Effective Date (what date did vacancy begin, or what date will it begin): | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | |
| The Applicant(s) attests that the Condominium unit will be checked at least twice per month by the Applicant(s) or a responsible person appointed by the Applicant(s) per the terms of the Vacancy Permit Endorsement?  No  Yes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | |
|  | If yes, provide name of Individual: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | |
| Reason for vacancy / plans for this property *– check all that apply:* | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| Condo is for sale | | | | | | | | | | | Condo will be rented to others | | | | | | | | | | Condo will be occupied by owner within 12months | | | | | | | | | |
| Condo is slated for demolition | | | | | | | | | | | Condo is in foreclosure | | | | | | | | | | Condo deemed not suitable for habitation | | | | | | | | | |
| Condo has unrepaired damage | | | | | | | | | | | Condo will be renovated | | | | | | | | | | Condo is in probate and will be for sale | | | | | | | | | |
| Other | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | |

**COVERAGES**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Domestic Appliances -** $25,000 Included | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Unit Owners Improvements and Betterments** - $25,000 included by default | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Select limit: | | | | | | | $25,000 | | | | | | | | $50,000 | | | | | | | | | $75,000 | | | | | | | $100,000 | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Loss Assessment** - $50,000 included ($5,000 Deductible Assessment, see options below) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | |
| **Condominium Deductible Assessment Coverage**  (restricted to events covered by this unit owners Policy if bound)  - $5,000 included by default | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Select limit: | | | | | | | $5,000 | | | | | | | $25,000 | | | | | | $50,000 | | | | | | | $75,000 | | | | | | $100,000 |
|  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Premises Liability** | | | | | | | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | Select limit: | | | | | | | $1,000,000 | | | | | | | $2,000,000 | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Deductible** | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | |
|  | Select deductible: | | | | | | | $1,000 (base deductible) | | | | | | | | | $2,500 (reduces base property premium by approx. 5%) | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Earthquake** | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | |
|  | Is earthquake coverage requested? | | | | | | | | | | | | No  Yes | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Sewer Backup** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | Is sewer backup coverage requested? | | | | | | | | | | | | No  Yes | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **POLICY TERM INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Requested Policy Term Length (In Months): | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **ISSUANCE INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Proposed Effective Date (MM/DD/YYYY): | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **MAILING ADDRESS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | | | | City: | | | |  | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |
| Province: | | |  | | | | | | | | | | | | | | | | Postal code: | | | | | | |  | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | |
| **WILDFIRE + FLOOD** | | | | | | |  | | | | | | | | | | | |  | | | | | | | | |  | | | | | | |
|  | | | | |  | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | |
| Is this risk located within 25kms of a current wildfire? | | | | | | | | | | | | | | | | | | | | No  Yes | | | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | |
| Is this risk located in an area that is currently under flood warning? | | | | | | | | | | | | | | | | | | | | No  Yes | | | | | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | |
| **MORTGAGEE INFORMATION** | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | |
| List in order ALL mortgagees, loss payees, additional interests, and other interested parties (name and address): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name or Legal Entity Name: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Address: | | |  | | | | | | | | | | | | | | | City: | | | |  | | | | | | | | | | | |
|  | | | | | |  | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | |
|  | Province: | | |  | | | | | | | | | | | | | | | Postal code: | | | | | | |  | | | | | | | | |
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| Full Name or Legal Entity Name: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
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|  | Address: | | |  | | | | | | | | | | | | | | | City: | | | |  | | | | | | | | | | | |
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|  | Province: | | |  | | | | | | | | | | | | | | | Postal code: | | | | | | |  | | | | | | | | |
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| **E-SIGNATURE AUTOMATION** | | | | | | | | | |  | | | | | | | | |  | | | | | | |  | | | | | | | | |
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| Applicant’s email address (Required for e-signature): | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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| **PLEASE READ BEFORE SIGNING:** The Applicant has reviewed this application form and all attachments and acknowledges that all information provided is true. The Applicant understands that any insurance that may be provided is based on the information in this application being true and correct, and any misrepresentation or omission will render any such insurance policy null or void from inception.  The Applicant understands that if the insured fails to immediately inform the insurer of material changes to these facts during the term of an insurance policy, the insurance may not be valid. The Applicant understands that they cannot contravene a term of the policy, commit a fraud, or willfully make false statements during a claim investigation.  The Applicant confirms that all individuals included in this application have authorized the collection and storage of their personal information. Credit information, claims history and other personal information may be collected, used and disclosed for the purposes of assessing and underwriting the application for insurance, renewals, evaluating claims, detecting and preventing fraud.    The Applicant hereby consents to the use of electronic communications, electronic records, and electronic signatures. The Applicant understands an electronic signature is legally binding, just as if the Applicant had signed a paper document.  **NOTE: INSURANCE IS NOT IN EFFECT UNTIL SUCH TIME AS FORWARD INSURANCE MANAGERS LTD. HAS ISSUED A BINDER OR INSURANCE POLICY IN WRITING THAT CONFIRMS COVERAGE IS IN PLACE.**  Forward Insurance Managers Ltd. is a managing underwriting agency duly licensed as an intermediary across Canada – and the insurance company at risk shall be duly listed on any quotation, binder or insurance policy. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Applicant Signature: | | | | | |  | | | | | | | | | | | | | | | | Date: | | | | |  | | | | | | | |
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| Brokerage: | | | | | |  | | | | | | | | | | | | | | | | Broker ID#: | | | | |  | | | | | | | |
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| Broker Name: | | | | | |  | | | | | | | | | | | | | | | | Broker Email: | | | | |  | | | | | | | |
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| **Email completed apps to** [**newpersonal@forwardinsurance.ca**](mailto:newpersonal@forwardinsurance.ca) **or for the quickest turnaround login to** [**JET**](http://www.forwardinsurance.ca)**.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |