**HARD TO PLACE OWNER-OCCUPIED RESIDENCE** –APPLICATION FOR INSURANCE

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| **APPLICANT INFORMATION:** | | | | | | | | | |
| Applicant’s email address\* (required for e-signature) | | | | | |  | | | |
| Applicant Name(s): *if company, provide principal name(s)* | | | | | |  | | | |
| Mailing address: | | | | | |  | | | |
| Date(s) of Birth: | | | | | |  | | | |
| Out of the last 12 months, how long has the applicant been employed? | | | | | | | | | |
| Source of applicant’s income:  Paid Employee  Self Employed  Retired  Homemaker  None - Benefits Assistance  None – Student  Other | | | | | | | | | |
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| How many mortgages / liens / encumbrances are on the property? | | | | | | | | 0  1  2  3 or more | |
| Are any mortgages, liens or encumbrance payments in arrears? | | | | | | | | No  Yes | |
| Easements / foreshore etc.: List any entities to be added, that do NOT occupy the premises (eg Her Majesty...)? | | | | | | | | | |
| Occupants: List any individuals requiring Additional Insured status with respect to Personal Property and Personal Liability coverage?    Insurable Interest / Title: List any individuals with an insurable interest requiring Additional Insured status with respect to Residential Building? | | | | | | | | | |
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| Reason the risk is not standard market (check all that apply): | | | | | | | | | |
| Poor housekeeping / lack of maintenance | | | | | | Non-standard plumbing | | Age of roof |
| Age of hot water tank | | | | | | Knob + tube | | Aluminum wiring |
| Remote location | | | | | | Heritage designation | | 60 amps |
| Cancelled for non-payment | | | | | | Loss / claims history | | Woodheat |
| Multiple or non-standard mortgages  Risk in a business name  Short-term rentals  Other: | | | | | | | | |
| Has insurance ever been cancelled or refused for this property? | | | | | | | | No  Yes - details: | |
| If yes, was insurance cancelled midterm?  No  Yes - details: | | | | | | | | | |
| Have there been any claims or losses (whether covered by insurance or not) at this location in the past 5 years? | | | | | | | | No  Yes – details below (attach sheet if needed) | |
| Claim Details (cause,  date, amounts paid) | | | |  | | | | | |
| Was damage professionally repaired?  Yes  No | | | | | | | | | |
| **RISK INFORMATION:** | | | | | | | | | |
| Risk location: | | | |  | | | | | |
| Size of property in acres: | | | | City sized lot  15 or less acress  More than 15 acres | | | | | |
| Has the risk location ever been evacuated or put on notice of evacuation due to a wildfire or flood?  No  Yes | | | | | | | | | |
| Year Built: | |  | | | | | | | |
| Type of building: | | | | Detached  Duplex  Triplex  Fourplex  Fiveplex  Sixplex +  Mobile  Row House/Townhouse | | | | | |
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| Type of construction: | | | | Wood Frame  Concrete Block / Masonry  Log  Fire Resistive  Clay  Straw  Modular / Prefab | | | | | |
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| Type of foundation: | | | | Poured Concrete  Concrete Block  Crawlspace  Treated Lumber  Brick / Stone  Post + Pier | | | | | |
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| Number of stories | | | | 1  2  3  4 or more | | | | | |
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| Square footage: | | | |  | | | | | |
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| Will the home be demolished in the next 24 months?  No  Yes | | | | | | | | | |
| Will there be any construction or renovation activity on the premises during the next 12 months?  No  Yes – details below. | | | | | | | | | |
| Details of renovation:  Renovation budget: $       Will there be any structural renovations (eg. adding or removing walls)?  No  Yes | | | | | | | | | |
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| Electrical Details: | | | | | | | | | |
| Circuit Breakers  Fuses  Knob + Tube  Mixed – more than one of the above types | | | | | | | | | |
| How many amps is the electrical system?  100 amps or more  Less than 100 amps | | | | | | | | | |
| Year of electrical update: | | | | | | | | | |
| Type of wiring:  Copper  Aluminum  Mixed – copper + aluminum | | | | | | | | | |
| If there is any aluminum wiring, what percentage is aluminum and has it been inspected and approved by a licensed e electrician? Percentage       Inspected?  No  Yes (attach copy of report) | | | | | | | | | |
| Roof Details: | | | | | | | | | |
| Material: | | | Asphalt Shingles  Cedar  Clay / Slate  Rubber  Flat Deck/Tar+Gravel  Green  Metal  Straw Thatched  Zinc  Multiple – more than one of above roof types | | | | | | |
| Year of complete roof replacement: | | | | | | | | | |
| Plumbing Details: | | | | | | | | | |
| Type(s): | | | Copper, PEX, PVC, ABS  Polybutylene  Galvanized steel  Kitec  Cast Iron  Mixed – more than one of the above types of plumbing | | | | | | |
| Year of plumbing update: | | | | | | | | | |
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| Year of hot water tank(s): | | | | | | | | | |
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| Heating Details: | | | | | | | | | |
| Is there a thermostatically regulated central heating system?  Yes  No | | | | | | | | | |
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| Does the home have a solid fuel heat device (other than traditional fireplace)?  Yes  No | | | | | | | | | |
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| If yes, is woodheat the primary source or more than 3 cords of wood burned annually?  Yes  No | | | | | | | | | |
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| Does the home have an oil tank?  Yes  No | | | | | | | | | |
| Is there an operational centrally monitored burglar alarm system?  Yes  No | | | | | | | | | |
| Is there an operational sprinkler system?  Yes  No | | | | | | | | | |
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| Is there a swimming pool?  Yes  No  If yes, is the pool fenced and access to the area controlled (e.g. locked gate)?  Yes  No | | | | | | | | | |
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| **Occupancy** | | | | |  | | | | |
| Is this the applicant’s primary residence?  Yes  No: | | | | | | | | | |
| Number of families living in the home:  1  2  3  4  5 or more | | | | | | | | | |
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| Will there be any rentals?       How many rental units?  1  2  3  4  5 or more  If yes, what type of rentals:  Long-term tenants  Short-term tenants  Short-stay (e.g. Airbnb /VRBO)  Bed & Breakfast  Roomers/boarders  Other: | | | | | | | | | |
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| Is there any farming, business, or commercial operations on premises?  No  Yes - describe: | | | | | | | | | |
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| Mortgagee(s) – Name + Address: | | | | | | | | | |
| **COVERAGE INFORMATION** | | | | | | | | | |
| Residential Building Limit: $ | | | | | | | | | |
| Detached Private Structures: 10% limit for detached structures included | | | | | | | | | |
| Personal Property: 60% limit included | | | | | | | | | |
| Annual Rental Income: $ | | | | | | | | | |
| Liability:  $1,000,000  $2,000,000 | | | | | | | | | |

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| Is earthquake coverage requested?  Yes  No  Is sewer backup coverage requested?  Yes  No  **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. |
| |  |  | | --- | --- | | **Applicant Signature:** | **Date:** |   **Brokerage:** **Broker ID#:**  **Broker Name:**        **Broker Email:** |