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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Instead of completing this application form, consider trying *JET*, our self-serve platform.**  ***JET* is the quickest path to quotes and policy issuance. A modern way FORWARD.** | | | | | | | | | | | | | | | | | | | |
| **APPLICANT INFORMATION** | | | | | | | | | | | | | | | | | | | |
| Applicant’s Contact Email Address for E-Signature\* | | |  | | | | | | | | | | | | | | | | |
| **\*PLEASE READ:** Applicant email is a **MANDATORY** field. Please ensure the email is correct, and do **NOT** substitute with a broker email.  JET utilizes this field to gather mandatory digital e-signature (a policy issuance requirement). | | | | | | | | | | | | | | | | | | | |
| Applicant Name(s):  *if company, provide principal name(s)* | | |  | | | | | | | | | | | | | | | | |
| Date(s) of Birth: | | |  | | | | | | | | | | | | | | | | |
| Province of Primary Residence: | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | |
| How many mortgages / liens / encumbrances are on the property? | | | | | | | | | | | | | 0  1  2  3 or more | | | | | | |
| Is the applicant behind/late in making their mortgage payments? | | | | | | | | | | | | | No  Yes | | | | | | |
| **Additional Insureds** | | | | | | | | | | | | | | | | | | | |
| Easements/foreshore etc.: List any entities to be added, that do NOT occupy the premises (eg. Her Majesty…): | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Insurable Interest / Title: List any individuals with an insurable interest requiring Additional Insured status with respect to Residential Building? | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Insurance & Loss History** | | | | | | | | | | | | | | | | | | | |
| Has insurance ever been cancelled or refused for this property? | | | | | | | | | | | | | 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  If yes, provide details: | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Building Information** | | | | | | | | | | | | | | | | | | | |
| |  | | --- | |  |   Year Built: | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | |
| Type of Building: | | Detached (or semi)  Duplex  Triplex  Fourplex  Fiveplex  Sixplex  More than 6  Row House/Townhouse  Mobile  Mixed Use (Comm. + Residential) | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | |
| Type of Construction: | | Wood Frame  Concrete Block / Masonry  Log  Fire Resistive  Clay  Straw  Modular / Prefab | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | |
| Type of Foundation: | | Poured Concrete  Concrete Block  Crawlspace  Treated Lumber  Brick / Stone  Post + Pier | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | |
| Number of Stories: | | 1  2  3  4 or more | | | | | | | | | | | | | | | | | |
| Total square footage (incl. basement if finished): | | | | | | | | | |  | | | | | | | | | |
| **Building Updates** | | | | | | |  | | | | | | | | | | | | |
| **Renovations / Demolition** | | | | | | |  | | | | | | | | | | | | |
| Has the home been taken down to the studs and completely renovated (gutted)?  Yes  No | | | | | | | | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | |
| Will there be any renovations to the home in the next 12 months? | | | | | | | | | | | | | Yes | | | No | | | |
|  | | | | | | | | | | | | |  | | | | | | |
| If yes, please check all that appy: | | | | | Minor cosmetic (paint, flooring, cabinets) | | | | | | | | | Basement finishing/reno | | | | | |
|  | | | | | Kitchen bathroom reno | | | | | | | | | Addition to overall footprint of home | | | | | |
|  | | | | | Raising home or addition of level | | | | | | | | | Finishing garage to living space | | | | | |
|  | | | | | Maintenance – windows, roof, siding | | | | | | | | | Repairing property damage from an incident | | | | | |
|  | | | | | Complete home remodel | | | | | | | | | Foundation – reno/replace | | | | | |
|  | | | | |  | | | | | | | | |  | | | | | |
| What is the budget for renovations? | | | | | |  | | | | | | | |  | | | | | |
|  | | | | |  | | | | | | | | |  | | | | | |
| Will there be any structural renovations (eg. Adding or removing walls?) | | | | | | | | | | | | | | | | Yes | | | No |
|  | | | | |  | | | | | | | | |  | | | | | |
| Will the home be demolished in the next 24 months? | | | | | | | | | | | | | | | | Yes | | | No |
|  | | | | | | | | | | | | | | | | | | | |
| The Applicant(s) attests that the home will be maintained in a useable and safe condition right up until the commencement of demolition? | | | | | | | | | | | | | | | | | Yes | | No |
|  | | | | | | | | | | | | | | | | | | | |
| The Applicant(s) understands that policy coverage will reduce should vacancy occur, and ceases after 30 days of vacancy and immediately at the time of demolition activities (please refer to policy forms)? | | | | | | | | | | | | | | | | | Yes | | No |
|  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Electrical** | | | | | | | | | | | | | | | | | | | |
| How many amps is the electrical system?  100 amps or more  Less than 100 amps  Electrical system details:  Circuit Breakers  Fuses  Knob + Tube  Mixed – more than one of the above types | | | | | | | | | | | | | | | | | | | |
| Type of wiring:  Copper  Aluminum  Mixed – Aluminum + Copper | | | | | | | | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | | | | | | | | |
| Year of most recent electrical update: | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Roof** | | | | | | | | | | | | | | | | | | | |
| 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** | | | | | | | | | | | | | | | | | | | |
| Type(s): | Copper, PEX, PVC, ABS  Polybutylene  Galvanized steel  Kitec  Cast Iron  Mixed – more than one of the above types of plumbing | | | | | | | | | | | | | | | | | | |
| Year of most recent plumbing update: | | | | | | | | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | |
| Year of hot water tank(s): | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Heating** | | | | | | | | | | | | | | | | | | | |
| What is the primary heat device/appliance to regularly heat the home? | | | | | | | | | | | | | | | | | | | |
| Baseboard Electric | | | | Boiler – in floor radiant heat | | | | | | | | Boiler – water baseboard | | | | | |  | |
| ☐ Heat pump | | | | Forced air furnace | | | | | | | | Radiant ceiling heat panels – electric | | | | | | | |
| Plug-in space heaters | | | | Wood heat appliance | | | | | | | | Wall furnace / wall heater | | | | | | | |
| ☐ Combination – forced air furnace with add on wood burning unit | | | | | | | | | | | | ☐ Stoves (wood heat, pellet) | | | | | | | |
| Fireplace inserts | | | | ☐ Other – Describe: | | | | | | | | | | | | | | | |
| What is the primary heating fuel/source? | | | | | | | | | | | | | | | | | | | |
| Natural Gas | | | Propane | | | | | | | | Electricity | | | | Geothermal | | | | |
| Oil | | | Wood | | | | | | | | Solar | | | | Other | | | | |
| Does the home have a solid fuel heat device (other than traditional fireplace)?  Yes  No | | | | | | | | | | | | | | | | | | | |
| If yes: Is woodheat the primary source or are more than 3 cords of wood/  Yes  No  2 tons of pellets burned annually? | | | | | | | | | | | | | | | | | | | |
| Was the solid fuel heat device professionally installed?  Yes  No | | | | | | | | | | | | | | | | | | | |
| Is there a passed WETT inspection on file? (if yes, attach copy)  Yes  No | | | | | | | | | | | | | | | | | | | |
| Have modifications been made to the solid fuel heat device?  Yes  No | | | | | | | | | | | | | | | | | | | |
| **Other** | | | | | | |  | | | | | | | | | | | | |
| Does the home have an oil tank?  Yes  No | | | | | | | | | | | | | | | | | | | |
| Year of oil tank: | | | | | | | | | | | | | | | | | | | |
| Location of oil tank: Underground Above ground in home Above ground outside of home | | | | | | | | | | | | | | | | | | | |
| Are there operational smoke detectors?  Yes  No | | | | | | | | | | | | | | | | | | | |
| *(Smoke detectors are mandatory – otherwise risk will be declined)* | | | | | | | | | | | | | | | | | | | |
| Is there an operational sprinkler system?  Yes  No | | | | | | | | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | |
| **Occupancy** | | | | | | |  | | | | | | | | | | | | |
| Are there any commercial tenants in the building? (note: Airbnb / short-term rentals are considered residential, not commercial): No Yes  If yes, describe occupancy:    How long is the rental?  Annual  Monthly  Weekly (short-term eg. airbnb)  Daily (short-term eg. airbnb)  Other (Please describe):  How many rented, self-contained (with full kitchen/separate entrance) units are there? | | | | | | | | | | | | | | | | | | | |
| Basis of rental accommodation provided by landlord/applicant? | | | | | | | | | Renting by room (collecting rent individually from each room occupier)  Renting a complete unit(s) with kitchen and bath  Renting entire home  Student Housing (DO NOT CONTINUE – PLEASE REVERT TO OUR STUDENT HOUSING PRODUCT)  Other (Please describe): | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | |
| Who is responsible for the care and maintenance of the property?    Individual / caretaker / manager (paid)  Owner (who lives within 2.5 hours drive of the property)  Owner (who lives more than 2.5 hours drive from the property)  Friend /Relative  Tenant  Property is not checked regularly  Other (Please describe): | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | |
| Is there any farming, business, or commercial operations on premises?  No  Yes - describe: | | | | | | | | | | | | | | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **COVERAGE INFORMATION** | | | | | | | | | | | | | | | | | | | |
| Residential Building Limit\*: $ | | | | | | | | | | | | | | | | | | | |
| *\*10% limit for detached private structures + $50,000 limit for landlord's contents or domestic appliances is automatically included* | | | | | | | | | | | | | | | | | | | |
| **NOTE** – Forward Insurance Managers LTD. underwriting guidelines require that the home be valued in accordance with a current replacement cost calculator (RCT) or a minimum basic rebuild cost per square foot ($225 in BC, and $200 balance of Canada), whichever number is higher. Please ensure you are following this rule of thumb, or the JET platform will trigger a referral to an underwriter, thereby delaying your quote. | | | | | | | | | | | | | | | | | | | |
| Annual Rental Income: $ | | | | | | | | | | | | | | | | | | | |
| Premises Liability:  $1,000,000  $2,000,000 | | | | | | | | | | | | | | | | | | | |
| Deductible:  $1,000 (base deductible)  $2,500 (reduces base property premium by approx. 3.5%)  **Age of Home/ Update Information** | | | | | | | | | | | | | | | | | | | |
| Is earthquake coverage requested?  Yes  No | | | | | | | | | | | | | | | | | | | |
| Is sewer backup coverage requested?  Yes  No | | | | | | | | | | | | | | | | | | | |

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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. | | | | |
| **Signature of Applicant(s):** |  | **Date:** |  |
| **Brokerage:** |  | **Broker ID#:** |  |
| **Broker Email:** |  | **Phone:** |  |

**Email completed apps to newpersonal@forwardinsurance.ca or for the quickest turnaround, log in to *JET*.**