Logo

Description automatically generated**VACANT RESIDENTIAL BUILDING -** Application for Insurance

Vacant residential buildings up to a 4plex in size.

**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’s email address  (Required for e-signature) |  |  |
|  |  | |

|  |  |  |  |
| --- | --- | --- | --- |
|  | |  |  |
| Applicant Name (legal name): | |  |  |
|  | |  |  |
|  | Is the applicant a company? | No  Yes |  |
|  |  |  |  |
|  | Name of principal(s): |  |  |
|  |  |  |  |
| Additional Applicant Name(s): | |  |  |
|  |  |  |  |
|  | Is the applicant a company? | No  Yes |  |
|  |  |  |  |
|  | Name of principal(s): |  |  |
|  |  |  |  |
| Province of primary residence? | |  | |
|  | |  | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| How many mortgages / encumbrances are on the property? | | | | 0 | 1 | 2 | 3 or more |
|  | | | | | | | |
|  | Is any mortgage held with a non-conventional or private lender? | | | | | | No  Yes |
|  | | | | | | | |
|  | | How many non-conventional or private lenders are required to be listed on the policy? | | | | |  |
|  | | | | | | |  |
|  | If 3 or more, what is the reason for the third mortgage? | |  | | | | |
|  |  | |  | | | | |
|  | | How much equity does the applicant retain in the home (%)? | | | | |  |
|  |  | | | | | |  |
| Is the applicant behind/late in making their mortgage payments? | | | | | | | No  Yes |
|  | | | | | | |  |

**INSURANCE & CLAIMS HISTORY**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 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 professionally repaired? | | | | | No  Yes | | How much was paid for this loss? | | | $ | | |
|  | |  | | | | | |  | |  | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 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 professionally repaired? | | | | No  Yes | | How much was paid for this loss? | | | $ | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 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 professionally repaired? | | | | No  Yes | | How much was paid for this loss? | | | $ | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Has insurance ever been cancelled or refused for this property for any reason other than vacancy? | | | | | | | No  Yes |
|  | | | |  | | | |
|  | If yes, please describe: | | |  | | | |
|  | | | | | | | |
| Due to vacancy | | Due to non-payment | Due to future demolition | | | Due to a gap in coverage | |
| Due to claims | | Due to upcoming renos | Due to other reasons: | |  | | |

**RISK INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Risk location address: | |  | City: |  | |
|  | |  |  |  | |
| Province: |  | | Postal code/ ZIP code: | |  |
|  |  | |  | |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Is the home located on leased land? | | | | | | No  Yes |
|  | | | | | | |
|  | If yes, how long of a term remains in the land lease (number of years)? | | | | |  |
|  |  | | | | |  |
| Size of property in acres: | | City sized lot | | 15 or less acres | | 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, please provide details: | |  | | | |
|  |  | |  | | | |
|  |  | |  | | | |
| Is the front of the home clearly viewable from a paved road? | | | | | No  Yes | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Type of building: | | | Detatched (or semi) | | | Duplex | | Triplex | | | | | Fourplex |
|  | | | Fiveplex | | | sixplex+ | | Rowhouse/Townhouse | | | | | Mobile |
|  | | |  | | |  | |  | | | | |  |
| Type of construction: | | | Woodframe | | | Concrete Block/Masonary | | Log | | | | | Fire Resistive |
|  | | | Clay | | | Straw | | Modular/Prefab | | | | |  |
|  | | |  | | |  | |  | | | | |  |
| Year built: | | |  | | | Square footage: | |  | | | | |  |
|  | | |  | | |  | |  | | | | |  |
| Number of stories: | | | 1  2  3  4 or more | | | | |  | | | | |  |
|  | | |  | | |  | |  | | | | |  |
| Number of units: | | |  | | | Year of complete roof replacement: | | |  | | | |  |
|  | | | | | | | | | | | | | |
| Will the home be demolished in the next 24 months? | | | | | | | | | | | | No  Yes | |
|  | | | | | | | | | | | | | |
|  | | If yes, please describe: | |  | | | | | | | | | |
|  | | | | | | | | | | | | | |
| 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 of home | | |
| Addition of another level to the house | | | | | | Finishing garage to living space | | | | Maintenance – windows, roof, siding | | |
| Repairing property damage from an incident | | | | | | Foundation – reno/replace | | | | Complete house remodel | | |
|  | | | | | | | | | | | | | |
| What is the budget for renovations? | | | | | $ | | | | |  | | | |
|  | | | |  | | | | | |  | | | |
| Will there be any structural work or repairs? | | | | | | | | | | | | No  Yes | |
|  | | | | | | | | | | | | |  |
|  | | If yes, please describe: | |  | | | | | | | | | |
|  | | | | | | | | | | | | |  |

**VACANCY DETAILS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | | | | |  |
| Vacancy Effective Date (what date did vacancy begin, or what date will it begin): | | | | |  | |
|  | | | | |  | |
| Reason for vacancy / plans for this property *– check all that apply:* | | | | |  | |
|  | | | | |  | |
| Home is for sale | | | Home will be rented to others | Home will be occupied by owner within 12months | | |
| Home is slated for demolition | | | Home is in foreclosure | Home deemed not suitable for habitation | | |
| Home has unrepaired damage | | | Home will be renovated | Home is in probate and will be for sale | | |
|  | | |  |  | | |
| The Applicant(s) attests that the property (including interior) will be checked at least once every seventy-two (72) hours 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, name of person: | |  | | |  |
|  |  | |  | | |  |
| Is the interior and exterior of the building maintained in a saleable and useable condition at all times? | | | | | | No  Yes |
|  |  |  | | | |  |
|  | If no, describe: |  | | | |  |
|  |  |  | | | |  |
| Are any windows or doors boarded up? | | | | | | No  Yes |
|  |  |  | | | |  |
| Is there any farming, business, or commercial operations on premises? | | | | | | No  Yes |
|  | | | | | |  |
|  | If yes, describe: |  | | | | |
|  |  |  | | | | |

**COVERAGES**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | |
| Residential Building Limit\*: | | | $ | | | |  |
|  | | | | |  | |  |
|  | \*Detached Private Structures: 10% of residential building limit included | | | | | | |
|  | \*Domestic Appliances: $50,000 included | | | | | | |
|  |  | | | | | | |
| Premises Liability: | | $1,000,000 | | | | $2,000,000 | |
|  | |  | | | |  | |
| Deductible: | | $1,000 (base deductible) | | | | $2,500 (reduces base property premium by approx. 5%) | |
|  | | | |  | |  | |
|  | | | |  | |  | |
| Is earthquake coverage requested? | | | | | No  Yes | | |
|  | | | | |  | | |
| Is sewer backup coverage requested? | | | | | No  Yes | | |
|  | | | | |  | | |

**POLICY TERM INFORMATION**

|  |  |  |
| --- | --- | --- |
|  | | |
| Requested policy term length (in months): |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **ISSUANCE INFO** | | |
| Mailing address: |  |
| **Wildfire + Flood**  Is this risk located within 25 kms of a current wildfire?  Yes  No  Is this risk located in an area that is currently under flood warning?  Yes  No | | |
| **Mortgages** List in order ALL mortgagees, loss payees, additional interests+other interested parties (name+address)–*attach page if reqd* | | |
|  | | |
| Mortgagee 1 – Full Name of Legal Entity + Address, Province, Postal Code:       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Mortgagee 2 – Full Name of Legal Entity + Address, Province, Postal Code:       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

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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***](http://www.forwardinsurance.ca)**.** | | | | | | |