

Non-Standard Owner-Occupied Application



BROKER: _____ **DATE:** _____

APPLICANT

Insured's name:

Mailing address:

LOCATION DETAILS

Location address:

Mortgagee name and address:

Year built: _____ Construction: _____ Total Area: _____ (sq. ft)

Years owned: _____ Number of stories: _____

Dwelling type: _____ If other, please describe: _____

Is this a heritage building? YES NO Basement: YES NO

Is the property an acreage? YES NO If yes, how many acres? _____

Number of animals/reptiles/pets being raised or kept: _____

Has any portion of the building been remediated (due to mould, asbestos, grow ops etc.) in the past five years*? YES NO

If yes to above question, please provide details: _____

*proof of remediation may be required

Electrical: _____ If other, please describe: _____

Amperage: _____ If other, please describe: _____

Electrical System: _____ Electrical system year updated: _____

Plumbing type: _____ Plumbing year updated: _____

Heating: _____ If other, please describe: _____

Type of fuel: _____ If other, please describe: _____

Auxiliary heating type: _____ Heating system year updated: _____

* additional questionnaire and photos required *prior to binding*

Roof type: _____ Roof year updated: _____

PROTECTION

Hydrant distance: _____ Fire hall distance: _____
Fire extinguishers? YES NO Smoke detectors? YES NO

LIABILITY DETAILS

Indoor swimming pool: YES NO Outdoor swimming pool: YES NO

Indoor hot tub: YES NO Outdoor hot tub: YES NO

If outdoors, is pool/hot tub fenced and locked? YES NO

Is any portion of the dwelling or land rented, leased or occupied by others? YES NO

If yes to the above question, please provide details: _____

Is any portion of the dwelling used for business purposes? YES NO

If yes to the above question, please provide details: _____

Is this a waterfront property? YES NO

Does the property have piers, wharves or docks? YES NO

LIMITS OF INSURANCE

Building: Contents: Outbuildings:
 Valuation: Premises liability limit:

Sewer backup, earthquake, flood, water damage, glass, bylaws and theft coverage not available.

Has the broker seen the risk? YES NO Condition of the property:
 Has any insurer cancelled, declined, or refused to renew or issue habitational insurance to the applicant within the past 5 years? YES NO

If yes to the above question, please explain reasons:

Previous insurer: Expiry date:

LOSS HISTORY

Please list **all** of the **insured's** losses from the previous 5 years:

Date of Loss	Insurer	Amount Paid/Reserve	Type and Cause of Loss	Opened or Closed

Additional comments:

*****CURRENT PHOTOS OF FRONT AND BACK OF RISK MUST ACCOMPANY QUESTIONNAIRE*****

Note:

Protect your investment by inspecting your property on a regular basis. Drive by it monthly and conduct walk throughs at least semi annually. Look for:

- Signs of poor housekeeping and upkeep
- Steamed, blacked out or foiled windows
- A higher than usual electric bill or modifications to the electrical system
- Excessive build up of any mildew/mould around the exhaust vents

These can indicate illegal activity being conducted on the premises. Exercise careful tenant selection.

I may have provided information in this document and by other means and I may in future provide further personal information. Some of this personal information may include, but is not limited to, my credit card information and claims history. I authorize my broker or insurance company to collect, use and disclose any of this personal information, subject to the law and to my broker's or insurance company's policy regarding personal information, for the purposes of communicating with me, assessing my application for insurance and underwriting my policies, renewals, changes of coverage, evaluation of claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.

Applicant Signature: _____ **Date:** _____