

Residential Fuel Oil Tank Questionnaire

Broker: _____ Broker Email: _____

Insured: _____ Policy No.: _____

Street Address: _____ City: _____ Province: _____ Postal Code: _____

1. Location of oil tank: Inside Residence Outside Residence Underground
 Type of Tank: Steel Steel with interior liner Fiberglass Other
 Construction Approval Label: CSA ULC WH UL (to Canadian Standards)
 Spill Protection: Concrete Dam - Yes No Other Containment Devices - Yes No
2. Tank Support (Base Construction): Concrete Wooden Dirt
 Is tank fastened with a bracket for stability? Yes No If inside, is tank filled and vented outside? Yes No
 Is vent stack located higher than fill pipe? Yes No
3. Age of oil tank _____ years. (check tank for sticker or stamp with date) Is there a sticker or stamp? Yes No
4. Any rust, dents or evidence of corrosion? Yes No
5. Signs of leaks or oil spills, current or past? Yes No Specify: _____ (fill pipe, vent pipe, fuel line, drain)
6. Are fumes or odors evident? Yes No
7. Is tank inspected and serviced annually? Yes No
8. Is tank safe from vehicle impact? Yes No
9. Is there 61 cm/2 feet of clear airspace around the tank (helps provide condensation relief)? Yes No
10. Has the tank been painted for corrosion protection Yes No
11. Is the fuel supply line protected from physical damage? Yes No
12. Is tank filled regularly (keeping the tank filled helps prevent condensation – water build up inside the tank)? Yes No
13. Is the tank located at least 1.6 m/5 feet from any ignition source? Yes No
14. Is there a loop in the fuel line supply? Yes No
15. Where is the line filter located in relation to the house? Inside Outside
16. Is the fuel line protected where it passes through the foundation? Yes No
17. Where is the tank outlet located (supply line to furnace)? Top Side Bottom
18. Distance from fuel tank to furnace? _____ M Ft
19. Please attach photograph of installation, including fuel line.
20. Other Comments: _____

PLEASE READ BEFORE SIGNING: A claim will become invalid and the Insured's right of recovery is forfeited where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the insured fails to inform material changes to these facts during the term of the contract; (c) the insured contravenes a term of the contract or commits a fraud; or (d) the insured willfully makes a false statement in respect of a claim.

The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information.

The personal information provided in this document and in the future including, but not limited to, credit information and claims history may be collected, used and disclosed by the insured's representative or insurance company, subject to local legislation, for the purpose of communicating with the insured or their representative, assessing the application for insurance and underwriting any such policies, evaluating 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.

NOTE: Insurance is not in effect until Premier has issued a binder or policy documents.

Signature of Applicant

Date

Premier Marine Insurance Managers Group (WEST) Inc. is one of Canada's largest Managing Underwriting Agents. The underwriting insurance carrier varies by line of business and region - please refer to specific quote for declaration of the underwriting insurance company(s).

**** Email application and attachments to - newbizpersonal@premiergroup.ca ****

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