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MANUFACTURERS AND/OR DISTRIBUTORS SUPPLEMENT SECURITY & PROTECTION INDUSTRY PROGRAMME APPLICATION

Name of Applicant: _____

1. Description of Operations Projected Gross Receipts

Alarm Systems

- Manufacturing \$ _____
- Distribution/Sales \$ _____

Fire Protection Systems

- Manufacturing \$ _____
- Distribution/Sales \$ _____

Other Security Products

- Manufacturing \$ _____
- Sales \$ _____

Please provide full description of Other Security Products:

TOTAL of above Services \$ _____

2. Does your firm provide, or anticipate any operations or sales outside Canada? Yes No

Please provide details?

3. Annual Sales – U.S.A

PRODUCT	SALES
	\$
	\$
	\$
	\$

Annual Sales – Other Countries

COUNTRY	PRODUCT	SALES
		\$
		\$
		\$
		\$

4. Does your company sub-contract any operations to other companies? Yes No

If Yes, describe the operations sub-let:

Indicate annual gross cost of sub-let work \$ _____

Do your sub-contractors carry their own CGL insurance, including Failure to Perform Coverage? Yes No

Do you require liability certificates? Yes No

5. Are formal written contracts signed? Yes No

Do they contain a hold harmless agreement in your favour? Yes No

6. PROVIDE A FULL LIST OF PRODUCTS AND SERVICES. Provide appropriate website links and/or attach brochures.

7. Are all products U.L.C. listed and CSA approved? Yes No

8. Describe your quality control program:

Testing of incoming raw materials and components:

Testing of final product or installation:

Record kept for # _____ years

This supplement, together with the Security & Protection Programme application to which it is attached, constitute the Applicant's representations and will form the basis of any policy that may be issued.

Signature of Applicant _____ Dated _____



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