



Watts: 1-888-868-8367 (TOTTENS)

New Submissions: triage@tottengroup.com Website: www.tottengroup.com

STORAGE TANK POLLUTION LIABILITY RENEWAL APPLICATION

Underwriters will rely upon each and every response given in this Proposal Form and any Supplementary Proposal Form in deciding whether or not to insure this risk and if so at what premium, terms and conditions. Underwriters regard every response to be material to their decisions. Failing to answer or answering any question below incorrectly could invalidate any policy of insurance written by Underwriters for this risk.

We have a professional duty of confidentiality and are committed to holding personal information in strict confidence. The information provided to us will only be disclosed where required by law to do so or required to do so in conducting negotiations with third parties, such as insurance companies, on your behalf.

We will further safeguard the security of such information in a manner appropriate to sensitivity of that information.

Part 1: General Information

- 1. Name of Insured
2. Policy Number
3. Mailing Address (if changed)
4. A) Any changed to the covered location(s)?
B) Any changes to the tank schedule at the covered location(s)?

*If any changes or additional location(s), please complete full version of application (contact your Totten Underwriter)

Part 2: General Questions

- 1. Have you during the last five years, been prosecuted, or are you currently being prosecuted, for violations of any standard or law relating to the release or threatened release from the location of a regulated substance, hazardous waste or any other pollutant?
2. Have any claims been made against you during the last five years for cleanup or response action regulated substances, or bodily injury or property damage, resulting from the release of regulated substances, hazardous waste from this location or any other locations owned or operated by you, into the environment?
3. At the time of the signing of this application, do you know of any facts or circumstances, which may reasonably be expected to result in a claim being asserted against your company for environmental cleanup or response, or for bodily injury or property damage arising from the release of pollutants into the environment?

I/We hereby declare that the statements and particulars contained in this application are true and that I/we have not suppressed or misstated any material facts and I/we agree that should a policy be issued then this application shall be the basis of the contract with Underwriters.

If this proposal has been completed on my/our behalf, I/we agree the person is deemed to be my/our agent and that I/we have read the information provided before signing the form.

I/we confirm that I/we have read and understood the above declaration and the important noted overleaf.

Date Signature of Applicant

If in Company name, state position held

The proposal must be signed by a principal, director or partner of the proposed named insured