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**SEWER BACKUP APPLICATION**

Name \_\_\_\_\_

Policy # \_\_\_\_\_

Address \_\_\_\_\_

Postal Code \_\_\_\_\_

**Limit Requested**

1. Does your residence have plumbing in the basement, (shower, toilet, sink)?      Yes              No

2. Does your residence have a Sewer Backup Valve?    Yes              No

a) If yes, when was it installed? \_\_\_\_\_

b) If yes which type is it? ( check one)

**Backwater valve with flapper which protects the basement plumbing and the catch basin**

**Backup valve which protects only the catch basin**

3. Does your residence have an Automatic Sump Pump?    Yes              No

4. On many houses the eaves trough downspouts were direct back into the basement and connected to the basement sewer pipe instillation

a) Does this apply to your residence?    Yes              No

b) If yes, have the downspouts now been disconnected from the basement plumbing and redirected to your yard?    Yes              No

c) If yes, has the basement pip been capped?    Yes              No

5. How far away from your residence have the eaves trough downspouts been extended?  
Feet \_\_\_\_\_ Yards \_\_\_\_\_

6. Has your residence ever had any basement flooding or water damage?

a) During occupancy?    Yes              No

b) Prior to your occupancy?    Yes              No

If yes, please indicate the amount of the loss and the type of damage incurred:

\_\_\_\_\_

If yes, what corrective measures have been taken? \_\_\_\_\_

\_\_\_\_\_

**COVERAGE IS NOT BOUND UNTIL APPROVED BY THE COMPANY**

The coverage to the above questions are correct to the best of my knowledge and belief. I hereby authorize that reports contain claim history may be sought in connection with this application for insurance or renewal, extension or variation thereof.

Date: \_\_\_\_\_

Applicant's signature: \_\_\_\_\_