The Hobby Clubs package targets small to medium sized hobby and enthusiast groups and organizations – the group must be a NON-PROFIT organization. This program provides Commercial General Liability and Optional Property Coverage.

**Instead of completing this application form, consider trying** [*JET*](http://www.forwardinsurance.ca)**, our self-serve platform.**

[*JET*](http://www.forwardinsurance.ca) **is the quickest path to quotes and policy issuance. A modern way** [FORWARD](http://www.forwardinsurance.ca)**.**

**PLEASE READ CAREFULLY** ‐ Please review this application in detail for accuracy.  If there are any misrepresentations or omissions in the application, any insurance quote is deemed to be void, and any subsequent insurance policy will be rendered null and void from inception.

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| --- | --- | --- | --- | --- |
| **APPLICANT INFORMATION** | | | | |
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|  |  | |  |  |
| Applicant(s) / Legal Name(s): | |  | | |
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| **RISK LOCATION** (one location per policy) | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Address: | |  | | | City: | | | |  | | |
|  |  |  | | |  | | |  | | | |
| Postal Code: | | |  | | Province: | | | |  | | |
|  | | | |  |  | | | | |  | |
| Does the Applicant have any locations outside of Canada that require coverage under the proposed application for insurance?: | | | | | | | | | | | Yes  No |
|  | | | | | |  | | | | | |
| What year was the Applicant Club established? : | | | | | | |  | | | | |
| Is the Applicant strictly a non-profit hobby group? | | | | | | Yes  No | | | | | |

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| **RISK INFORMATION** | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| **PURPOSE OF HOBBY CLUB** | | |  | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| What is the Applicant’s hobby club interest? | | | | | |  | | | | | | | | | | |
| **MEMBERSHIP INFORMATION** | | | |  |  | | |  | | | |  |  | | | |
|  | | | |  |  | | |  | | | |  |  | | | |
| How many members are in the hobby club? | | | | | |  | | | | | | | | | | |
|  | | | |  |  | | |  | | | |  |  | | | |
| **FINANCIAL INFORMATION** | | | |  |  | | |  | | | |  |  | | | |
|  | | | |  |  | | |  | | | |  |  | | | |
| Forecasted total annual revenue for the next 12 months? | | | | | | | | | $ |  | | | | | | |
|  | | | | | | |  | | | |  | | |  | | |
| **PRIOR INSURANCE** | | | | | | |  | | | |  | | |  | | |
|  | | | | | | |  | | | |  | | |  | | |
| Is the Applicant(s) a CURRENT Forward policyholder? | | | | | | | | | | | | | | | Yes  No | |
|  | | | | | | | | | | | | | | |  | |
| Is the Applicant(s) a PREVIOUS (and no longer) Forward policyholder? | | | | | | | | | | | | | | | Yes  No | |
|  | |  | | | | | | | | |  | | |  | | |
| Does the Applicant currently carry Commercial General Liability insurance? | | | | | | | | | | | | | | | Yes  No | |
|  | | | | | | | | | | | | | | |  | |
| Has the Applicant ever had Commercial General Liability insurance cancelled, declined, or refused? | | | | | | | | | | | | | | | Yes  No | |
|  | | | | | | | | | | | | | | |  | |
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| **LOSS HISTORY** | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| Has the Applicant had any claims in the last five years? If so, provide details. | | | | | | | | | | | | | | | Yes  No | |
|  | | | | | | | | | | | | | | | | |
| Claim 1 Details – Date: | | | |  | | | |  | | |  | | | | | |
|  | | |  | | | | | | | |  | | | | | |
|  | | Nature of Claim: | | |  | | | | | | | | | | | |
|  | |  | | |  | | | | | | | | | | | |
|  | | Aircraft or vehicle impact | | | | Arson | | | Burglary | | | Change in Temperature | | | | |
|  | | Earthquake | | | | Electrical Current | | | Explosion | | | Falling Object | | | | |
|  | | Fire | | | | Flood | | | Freezing | | | Hail | | | | |
|  | | Landside | | | | Lightning | | | Malicious Acts | | | Other-Liability | | | | |
|  | | Other - Property | | | | Overland Water | | | Riot | | | Sewer Backup | | | | |
|  | | Smoke | | | | Storm | | | Slip & Fall | | | Tenant Vandalism | | | | |
|  | | Theft | | | | Vandalism | | | Water | | | Wildfire | | | | |
|  | | Wind  Liability – Other | | | | Liability – Property damage to others | | | Liability – Bodily Injury | | | Liability – Financial Loss to others | | | | |
|  | | Cyber Incident | | | |  | | |  | | |  | | | | |
|  | | | | | | | | | | | |  | | | | |
|  | How much was paid for this loss? | | | | | | $ | |  | | | | | | | |
|  | | Is the claim file closed? | | | | | Yes  No | | Have all damages been repaired? | | | | | | | Yes  No |
|  | |  | | | | |  | |  | | | | |  | | |
|  | | Describe the loss control measures that are now in place to avoid a future similar loss: | | | | | | | |  | | | | | | |
|  | |  | | | | | | | |  | | | | | | |
| Claim 2 Details – Date: | | | |  | | | |  | | |  | | | | | |
|  | | |  | | | | | | | |  | | | | | |
|  | | Nature of Claim: | | |  | | | | | | | | | | | |
|  | |  | | |  | | | | | | | | | | | |
|  | | Aircraft or vehicle impact | | | | Arson | | | Burglary | | | Change in Temperature | | | | |
|  | | Earthquake | | | | Electrical Current | | | Explosion | | | Falling Object | | | | |
|  | | Fire | | | | Flood | | | Freezing | | | Hail | | | | |
|  | | Landside | | | | Lightning | | | Malicious Acts | | | Other-Liability | | | | |
|  | | Other - Property | | | | Overland Water | | | Riot | | | Sewer Backup | | | | |
|  | | Smoke | | | | Storm | | | Slip & Fall | | | Tenant Vandalism | | | | |
|  | | Theft | | | | Vandalism | | | Water | | | Wildfire | | | | |
|  | | Wind  Liability – Other | | | | Liability – Property damage to others | | | Liability – Bodily Injury | | | Liability – Financial Loss to others | | | | |
|  | | Cyber Incident | | | |  | | |  | | |  | | | | |
|  | | | | | | | | | | | |  | | | | |
|  | How much was paid for this loss? | | | | | | $ | |  | | | | | | | |
|  | | Is the claim file closed? | | | | | Yes  No | | Have all damages been repaired? | | | | | | | Yes  No |
|  | |  | | | | |  | |  | | | | |  | | |
|  | | Describe the loss control measures that are now in place to avoid a future similar loss: | | | | | | | |  | | | | | | |
|  | |  | | | | | | | |  | | | | | | |
| Claim 3 Details – Date: | | | |  | | | |  | | |  | | | | | |
|  | | |  | | | | | | | |  | | | | | |
|  | | Nature of Claim: | | |  | | | | | | | | | | | |
|  | |  | | |  | | | | | | | | | | | |
|  | | Aircraft or vehicle impact | | | | Arson | | | Burglary | | | Change in Temperature | | | | |
|  | | Earthquake | | | | Electrical Current | | | Explosion | | | Falling Object | | | | |
|  | | Fire | | | | Flood | | | Freezing | | | Hail | | | | |
|  | | Landside | | | | Lightning | | | Malicious Acts | | | Other-Liability | | | | |
|  | | Other - Property | | | | Overland Water | | | Riot | | | Sewer Backup | | | | |
|  | | Smoke | | | | Storm | | | Slip & Fall | | | Tenant Vandalism | | | | |
|  | | Theft | | | | Vandalism | | | Water | | | Wildfire | | | | |
|  | | Wind  Liability – Other | | | | Liability – Property damage to others | | | Liability – Bodily Injury | | | Liability – Financial Loss to others | | | | |
|  | | Cyber Incident | | | |  | | |  | | |  | | | | |
|  | | | | | | | | | | | |  | | | | |
|  | How much was paid for this loss? | | | | | | $ | |  | | | | | | | |
|  | | Is the claim file closed? | | | | | Yes  No | | Have all damages been repaired? | | | | | | | Yes  No |
|  | |  | | | | |  | |  | | | | |  | | |
|  | | Describe the loss control measures that are now in place to avoid a future similar loss: | | | | | | | |  | | | | | | |
|  | |  | | | | | | | |  | | | | | | |
| Has the Applicant had more than three claims in last five years? | | | | | | | | | | | | | Yes  No | | | |
|  | | | | | | | | | | | | |  | | | |
| **PRIVACY LAWS** | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | |  | | | |
| The Applicant attests and agrees that it complies with all applicable privacy laws and regulations. | | | | | | | | | | | | | Yes  No | | | |
|  | | | | | | | | | | | | |  | | | |
| **EXPOSURE OUTSIDE CANADA** | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | |  | | | |
| Does the Applicant have any activities outside of Canada? | | | | | | | | | | | | | Yes  No | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **COVERAGES** | | | | | | | | | | |
|  | | | |  | |  | |  | | |
| Commercial General Liability Limit: | | | | | $1,000,000 | | $2,000,000 | | | $3,000,000 |
|  | | | | | $4,000,000 | | $5,000,000 | | |  |
|  | | | | |  | |  | | |  |
|  | | Tenant’s Legal Liability Limit: | | | $0 (not required) | | $500,000 | | | $1,000,000 |
|  | |  | | | $2,000,000 | |  | | |  |
|  | |  | | |  | |  | | |  |
|  | | Non-Owned Auto Limit: | | | $0 (not required) | | $1,000,000 | | | $2,000,000 |
|  | |  | | |  | |  | | |  |
| **Optional Host Liquor Liability:** | | | | | | | | | | |
| Host liquor liability coverage can be added for an additional charge, but only for the purposes of a membership banquet/dinner (up to a max of 4 per year). If you require coverage for anything outside of this, please refer to the Special Events Liability product for a separate quote/policy. | | | | | | | | | | |
|  | | | | | | | | | | |
| Does the Applicant require host liquor liability coverage for membership banquet(s)/dinner(s)? | | | | | | | | | Yes  No | |
|  | | If yes, number of membership banquets(s)/dinner(s) requiring host liquor liability coverage per year: | | | | | | |  | |
|  | |  | | | | | | |  | |
|  | | If yes, maximum number of people attending each banquet/dinner: | | | | | | |  | |
|  | |  | | | | | | |  | |
| **Optional Property** | | | | | | | | | | |
| Does the Applicant only require a Miscellaneous Articles Floater to cover property? | | | | | | | | | Yes  No | |
|  | If Yes, Miscellaneous Articles Floater limit: | | | | | | | |  | |
|  |  | | | | | | | |  | |
| Does the Applicant require optional property coverage? | | | | | | | | | Yes  No | |
|  | If yes, enter only limits for Coverage on a COED basis OR a Business Personal Property/ Stock basis | | | | | | | |  | |
|  |  | | | | | | | |  | |
|  | Option A) COED Limit: | | | | | | | | $ | |
|  | OR | | | | | | | |  | |
|  | Option B) Business Personal Property Limit: | | | | | | | | $ | |
|  | Option B) Stock/Inventory Limit: | | | | | | | | $ | |
|  |  | | | | | | | |  | |
|  | Extra Expense Limit: | | | | | | | |  | |
|  | Not required  $5,000  $10,000  $15,000  $20,000  $25,000 | | | | | | | | | |
|  |
|  | Sewer Backup coverage: | | Yes  No | | | | | | | |
|  | Flood coverage: | | Yes  No | | | | | | | |
|  | Earthquake coverage: | | Yes  No | | | | | | | |
|  |  | | | | | | | |  | |
|  |  | | | | | | | |  | |
| **Natural Disaster Exposure** | | | | | | | | | | |
|  | | | | | | | | | | |
| Is this risk located in a flood zone? | | | | | | | | | Yes  No | |
| What is the distance to the nearest body of water (in meters)? | | | | | | | | | m | |
|  | | | | | | | | |  | |
| Has the risk location ever been evacuated or put on notice of evacuation due to flood? | | | | | | | | | Yes  No | |
|  | | | | | | | | |  | |
| Is this risk location within 25 kms of a current wildfire? | | | | | | | | | Yes  No | |
| Has the risk location ever been evacuated or put on notice of evacuation due to wildfire? | | | | | | | | | Yes  No | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ADDITIONAL INSUREDS** | | | | |  | | | | | | | | | |  | | | | | |  | |
|  | | | | |  | | | | | | | | | |  | | | | | |  | |
| Add any Additional Insureds required with respect to liability coverage (eg. Landlord, contract requirements, etc.): | | | | | | | | | | | | | | | | | | | | |  | |
|  | | | | |  | | | | | | | | | |  | | | | | |  | |
| Name | |  | | | | | | | | Address: | | |  | | | | | | | | | |
|  | | | | | |  | | | | | |  | | | |  | | | |  | | |
| City: | | |  | | | | Province: | | | |  | | | Postcode/ZIP Code: | | | | | | | |  |
|  | | |  | | | |  |  | | |  | | | | | |  |  | | | | |
|  | | |  | | | |  |  | | |  | | | | | |  |  | | | | |
| What is the relation between the Applicant and the additional insured entity? | | | | | | | | | | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | | | | | | |
|  | Landlord | | | | | | | | Government Body | | | | | | | | | | Lessor/ Finance Company | | | |
|  | Subsidiary (100% wholly owned by Applicant) | | | | | | | | Sponsor of Event | | | | | | | | | | Customer of Insured | | | |
|  | Subsidiary (not wholly owned by Applicant) | | | | | | | | Lead Contractor | | | | | | | | | | Joint Venture | | | |
|  |  | | | | | | | |  | | | | | | | | | |  | | | |
| **PLEASE READ BEFORE SIGNING:** The Applicant has reviewed this application form and all attachments and acknowledges that all information provided is true. The Applicant understands that any insurance that may be provided is based on the information in this application being true and correct, and any misrepresentation or omission will render any such insurance policy null or void from inception.  The Applicant understands that if the Insured fails to inform the Insurer of material changes to these facts during the term of an insurance policy, the insurance may not be valid. The Applicant understands that they cannot contravene a term of the policy, commit a fraud, or willfully make false statements during a claim investigation.  The Applicant confirms that all individuals included in this application have authorized the collection and storage of their personal information. Credit information, claims history and other personal information may be collected, used and disclosed for the purposes of assessing and underwriting the application for insurance, renewals, evaluating claims, detecting and preventing fraud.  **NOTE: INSURANCE IS NOT IN EFFECT UNTIL SUCH TIME AT FORWARD INSURANCE MANAGERS LTD. HAS ISSUED A BINDER OR INSURANCE POLICY IN WRITING THAT CONFIRMS COVERAGE IS IN PLACE.**  Forward Insurance Managers Ltd. is a managing underwriting agency duly licensed as an intermediary across Canada – and the insurance company at risk shall be duly listed on any quotation, binder or insurance policy.  The Applicant hereby consents to the use of electronic communications, electronic records, and electronic signatures. The Applicant understands an electronic signature is legally binding, just as if the Applicant had signed a paper document. | | | | | | | | | | | | | | | | | | | | | | |
| **Signature of Applicant(s):** | | | |  | | | | | | | | | | **Date:** | | | | |  | | | |
| Contact Email Address  (for e-signature): | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | |  | | | | |  | | | |
| **Brokerage:** | | | |  | | | | | | | | | | **Broker ID#:** | | | | |  | | | |
|  | | | |  | | | | | | | | | |  | | | | |  | | | |
| **Broker Email:** | | | |  | | | | | | | | | | **Phone:** | | | | |  | | | |