



COMPLETION OF THIS FORM INDICATES YOUR CONSENT FOR PROCESSING YOUR PERSONAL INFORMATION. PLEASE REFER TO PAGE 3 FOR DETAILS ON OUR PRIVACY POLICY.

CENTRAL STATION MONITORING SERVICES SUPPLEMENTAL APPLICATION TELEPHONE ANSWERING AND PAGING SERVICE SUPPLEMENTAL APPLICATION

This Supplemental Application must be submitted along with our main Security Service Liability Insurance Application

Please read and complete the application in its entirety. Blanks &/or dashes are not acceptable and will delay consideration of this application. Answer all questions, if the question does not apply, indicate "N/A" in the space provided.

1. Applicant Name _____

2. Description of Operations	Estimated Annual Income
<input type="checkbox"/> <u>Alarm Systems</u> - Monitoring	
Residential	\$ _____
Commercial	\$ _____
<input type="checkbox"/> <u>Fire Protection Systems</u> - Monitoring	
Residential	\$ _____
Commercial	\$ _____
<input type="checkbox"/> <u>Environmental Security Systems</u> - Monitoring	
Sewage Treatment Plants	\$ _____
Nuclear / Power Plants	\$ _____
Other: _____	\$ _____
<input type="checkbox"/> Telephone Answering Services	\$ _____
<input type="checkbox"/> 911 Emergency Services	\$ _____
<input type="checkbox"/> Paging Services	\$ _____
<input type="checkbox"/> Secretarial	\$ _____
<input type="checkbox"/> Other (Please describe)	\$ _____
Total Estimated Annual Income	\$ _____

3. Please indicate the percentage of your business for the following clients

Furriers/Jewellers _____ %	Financial Institutions _____ %	Retail _____ %
Major Public _____ %	Environmental _____ %	Storage _____ %
Residential _____ %	Other (Please describe) _____ %	

4. Please list your five (5) largest clients and describe the operations offered by these clients

5. **Questionnaire:**

a) Year your company was established? _____

b) What is your area of operation? _____

c) Are certificates issued? Yes No

If yes, types of certificates _____

d) Is your station U.L.C. listed? Yes No

Designation _____ Levels _____

e) Are security audits conducted? Yes No

If yes, by whom? _____ Frequency _____

f) Do you have written procedures for your operations? Yes No

g) Is there a formal training program for operators? Yes No

h) What is the minimum training or experience required for operators? _____

i) Is your monitoring system computerized? Yes No

j) Is access to monitoring facilities strictly controlled? Yes No

k) Minimum number of staff in attendance? _____

l) Is back up power available? Yes No

Describe procedures for system/power failure

Do you have an uninterrupted power source (UPS)? Yes No

How is the UPS maintained and by whom?

How many hours does the back-up system work for the event of power failure? Please provide details _____

Indicate the experience/qualification of the person providing maintenance to the UPS

- m) Are Runner/Guards dispatched? Yes No
 Own employees? _____ Other - describe _____
- n) Are customer's keys kept? Yes No
 If yes, how stored and identified? _____
- o) Who is installing & servicing alarm systems? Outside Contractors Own Contractors
 Describe _____

If you are installing and/or servicing alarm systems please complete the Installers Supplemental Application

- p) Do you require outside installers to provide evidence of liability insurance? Yes No
- q) Are there minimum requirements that installers must meet to be acceptable? Yes No
 Describe _____
- r) Do contracts attempt to limit liability? (attach copy) Yes No

This supplement attaches to and is part of the application that shall form the basis of the contract, should a policy be issued.

NOTICE CONCERNING PERSONAL INFORMATION

By soliciting insurance from South Western Insurance Group Limited, you agree and provide consent that your personal information, including that previously collected, will be collected, processed, used, communicated, transferred and retained for the following purposes:

- the communication with underwriters;
- the evaluation of claims;
- the analysis of business results;
- In accordance with SWG's privacy policy available at the bottom of this application and as per our website: www.swgins.com/page/privacy.htm
- the underwriting of policies;
- the detection and prevention of fraud;
- purposes required or authorized by law;

You can exercise your right to access your personal information in our possession, to have it rectified or to withdraw your consent by contacting us at PrivacyOfficer@swgins.com. Should you exercise your right to withdraw your consent to the communication or use of the information collected required to provide certain products or services, this would prevent South Western Insurance Group from being able to provide such products or services. Further information about South Western Insurance Group Limited personal information protection policy may be obtained by contacting our privacy officer at 416-620-6604.

WARRANTY STATEMENT

The undersigned warrants that to the best of his or her knowledge, the statements set forth in this Application are true. In the event that there is any material change in the answers given to the questions contained in this application prior to the inception of the policy, the applicant must notify the underwriters in writing and the underwriters may revoke, or effect changes to, the quotation provided. Signing of the proposal does not bind the undersigned to complete the insurance but it is agreed that this form, and any additional information/document provided in support thereof by the client and/or broker, shall be the basis of the contract should a policy be issued.

NEW BRUNSWICK RESIDENTS ONLY:

I hereby confirm my request that the present document and any other document and correspondence pertaining to the present insurance be in the English language.

SIGNATURE

Signature:		Date (mm/dd/yyyy):	
	(Authorized Representative)		
Name (please print):		Title/Position:	



Privacy Policy

South Western Insurance Group Limited is committed to protecting the privacy and the confidentiality of our brokers and their Insured's personal information. In order to comply with privacy legislation, we have developed this Privacy Policy. Any personally identifiable information about an Insured is considered personal information and will be treated in accordance with this Privacy Policy.

IDENTIFIED PURPOSES

South Western Group only collects, uses and discloses Personal Information for the following purposes:

- Offering and providing insurance and related products and services;
- Verifying the identity and the accuracy of personal information with government agencies, industry associations, or other Insurers;
- Analyzing, assessing and underwriting risks on a prudent basis;
- Investigating and paying claims;
- Detecting and preventing fraud or other illegal activities;
- Compiling statistics;
- Complying with the laws or the requests of law enforcement agencies or regulators.

In this Privacy Policy, the above list of Identified Purposes will be referred to as the 'Identified Purposes'.

THIRD PARTY DISCLOSURE

South Western Insurance Group may share information about you with third party companies, permitted by law. Such disclosures may include those that South Western feels are required to provide customer service, prevent fraud, perform research or comply with the law. Recipients may include South Western's family of insurance service companies, claims representatives, service providers, consumer reporting agencies, insurance agents and brokers, law enforcement, courts and government agencies. These parties may disclose the information to others as permitted by law.

PRIVILEGE & CONFIDENTIALITY NOTICE – Electronic Messages

Electronic mail or faxes and any files transmitted with them are confidential and may be privileged and are intended solely for the use of the individual or entity to whom they are addressed. If you have received this e-mail in error, please notify the sender immediately.

CONSENT

South Western Group relies on the following actions by our Brokers and Companies as indication of their consent from an Insured to our existing and future Personal Information practices:

- The Broker has voluntarily requested personal information from an Insured for the purpose of acquiring an insurance contract or related service or product;
- The Broker has the Insured's express consent or acknowledgement contained within a written, verbal or electronic application process;
- The Insured's consent solicited by our Companies or our Brokers is for a specified purpose;
- The Broker must provide the Insured with a copy of their privacy policy and must inform South Western Group of any withdrawal of this consent by an Insured;
- The Broker may obtain the Insured's consent through the Insured's authorized representative such as a legal guardian, agent or holder of a power of attorney.

If an Insured refuses to provide the Broker with certain Personal Information or withdraws their consent South Western Group may be unable to provide insurance coverage.

LIMITING COLLECTION AND RETENTION OF PERSONAL INFORMATION

South Western Insurance Group will only collect, use or disclose personal information that is necessary for the Identified Purposes or as required by law. We will retain personal information only as long as necessary for the fulfillment of the Identified Purposes. South Western may store certain data in jurisdictions outside of Canada and may share information with third party companies that are located outside of Canada.

ACCURACY

South Western Group requests our brokers to maintain the Insured's Personal Information as accurate, complete, and up-to-date as is necessary for the Identified Purposes.

SAFEGUARDS

South Western Group will protect the Insured's Personal Information by security safeguards appropriate to the sensitivity of the information. Safeguards will vary depending on the sensitivity, format, location and storage of the Personal Information.

ACCOUNTABILITY, OPENNESS AND ACCESS

South Western Group is responsible for all Personal Information under its control and has designated a Privacy Officer who is accountable to Senior Management for South Western's compliance with the Privacy Policy.

You may contact our Privacy Officer at PrivacyOfficer@swgins.com.

CHALLENGING COMPLIANCE

If any Broker is not satisfied with South Western's response to a privacy related inquiry or complaint, they may contact the Office of the Privacy Commissioner of Canada during business hours at [1-800-282-1376](tel:1-800-282-1376) or at www.privcom.gc.ca.

Please refer to the updated comprehensive version of privacy policy on our website: www.swgins.com/page/privacy.htm