

# TOTTEN GROUP

I N S U R A N C E

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## PREMISES POLLUTION LIABILITY 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.

**Required Information:**

- Loss information from the last 5 years.
- All available Environmental Site Assessments or Remediation Reports.
- Recent tightness (precision) test or leak detection records for underground storage tanks over the age of 15 years.

1. Name of Applicant \_\_\_\_\_

2. Mailing Address \_\_\_\_\_

3. Named Insured is  Partnership  Corporation  Joint Venture  Other

4. Please provide a detailed description of the Named Insured's operations: \_\_\_\_\_

5. Please provide the Applicant's revenues for the upcoming year and previous five years:

a) Estimated revenues (coming year): \_\_\_\_\_

b) Revenues for last five years:

Year					
Revenues					

6. List the location(s) for which coverage is required:

Legal Address	Nature of Operations/Occupancy	Prior Land Use (if known)	Size at lot (sq ft)	First Year of Occupancy

7. Please list the raw materials used at the Covered Locations indicated in question 6:

Raw Material Description	Total Amount Used Per Year	Maximum Amount Used at Any One Time	Method of Storage



8. Inspections/Risk Management of Covered Locations:

a) Inspection contact (please provide the name and telephone number of the inspection contact for each Covered Location):

\_\_\_\_\_

9. Do any of the covered location(s) have aboveground or belowground storage tanks?  Yes  No  
If "Yes", please complete the supplementary questionnaire for storage tanks on pages 4&5

10. Does the applicant maintain a Spill Prevention, Control and Countermeasure Plan (SPCC Plan) or Emergency Response Plan (ERP)? If "Yes", please provide a copy of the plan.  Yes  No

11. Do any of the locations listed in question 6. above require any federal, provincial, or municipal environmental permits, certificates of approval or environmental compliance approvals to operate?  Yes  No  
If "Yes", please provide details \_\_\_\_\_

\_\_\_\_\_

12. Has there been or are there any remediation works currently ongoing or planned at any of these locations?  Yes  No  
If yes, please provide a description and attach any supporting documents. \_\_\_\_\_

\_\_\_\_\_

**NOTE**

**For the purposes of questions 13. to 16. "you" means the named insured entity and any Director, Officer or Partner thereof.**

13. Have you in the last five (5) years had any reportable releases or spills of hazardous substances, hazardous waste or any other pollutants, as defined by applicable environmental statutes or regulations?  Yes  No  
If "yes" please describe \_\_\_\_\_

\_\_\_\_\_

14. Have you in the last five (5) years been prosecuted or threatened with prosecution or are you currently being prosecuted for any offense directly or indirectly arising out of a release from the premises detailed above of any substance into sewers, any surface water, air, or into land or groundwater?  Yes  No  
If "yes" please describe \_\_\_\_\_

\_\_\_\_\_

15. List all the claims made against you during the last five (5) years for clean-up, bodily injury, property damage or nuisance, resulting from the release of hazardous substances, hazardous waste or other pollutants from the premises detailed above or any other locations owned or operated by you into the environment.

\_\_\_\_\_

16. At the time of signing this proposal, are you aware of any facts or circumstances which may reasonably be expected to give rise to a claim or claims being asserted against you for clean-up, bodily injury, property damage or nuisance arising from a release of pollutants into the environment or for environmental damage?  Yes  No  
If "yes" please describe \_\_\_\_\_

\_\_\_\_\_

17. Does the applicant currently have Premises Pollution Liability insurance for the locations listed on this application?  Yes  No  
If "Yes" please provide the following

Insurer: \_\_\_\_\_

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

Limit of Liability: \_\_\_\_\_

Deductible: \_\_\_\_\_

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

18. Limits of Liability Requested:

- \$1,000,000 / \$1,000,000       \$2,000,000 / \$2,000,000       \$3,000,000 / \$3,000,000
- \$4,000,000 / \$4,000,000       \$5,000,000 / \$5,000,000       Other \_\_\_\_\_



19. List all other insureds requesting coverage under the policy and describe their relationship with the Named Insured

Other Insured	Relationship to Insured

Additional Comment Section

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I/We hereby declare that the statements and particulars contained in this application are true and that I/we have not suppressed or mis-stated 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***



## SUPPLEMENTARY QUESTIONNAIRE FOR STORAGE TANKS

(Only complete if there are storage tanks)

### Notes:

1. One questionnaire must be completed for each Covered Location requiring coverage for storage tanks.
2. All questions must be completed in their entirety including the tank schedule below.
3. The Applicant must complete one tank schedule for each facility location.
4. This questionnaire is attached to and forms part of the application for Cleanup and Liability Insurance for Premises Pollution.

Covered Location Address: \_\_\_\_\_

1. Is there a history of leaks or releases from the tanks at this Covered Location?  Yes  No

If "Yes", please provide details \_\_\_\_\_

2. Were all tanks new at installation?  Yes  No

If no, please provide details regarding the date manufactured and any upgrades or changes made to the tank since the date manufactured.

3. Have any repairs or upgrades (including relining) been performed within the past 10 years for any tank?  Yes  No

If yes, why were the repairs or upgrade performed? \_\_\_\_\_

4. Were any tanks ever removed or closed at any of the listed facilities?  Yes  No

If yes, please provide details why \_\_\_\_\_

5. Do any plans exist to remove or replace any tanks within the next 12 months?  Yes  No

If yes, please provide details of the planned dates and actions: \_\_\_\_\_

6. Does the Applicant currently have pollution liability insurance coverage for the tanks on this application?  Yes  No

If yes, please provide the insurer's name, the policy's limits of liability, premium and deductible: \_\_\_\_\_

7. Are there any oil/water separators on any of the listed facilities?  Yes  No

If yes, please provide specific details as to why it is required, type, location and age: \_\_\_\_\_

**ALL STORAGE TANKS AT A GIVEN FACILITY MUST BE IDENTIFIED (WHETHER OR NOT THEY ARE OWNED OR OPERATED BY THE APPLICANT).**

**IF TOTTEN IS UNABLE TO COVER ALL STORAGE TANKS AT A FACILITY, TOTTEN MAY NOT BE ABLE TO COVER ANY OF THE STORAGE TANKS AT THAT FACILITY.**



## Tank Schedule

Facility Address (please complete one for each facility):

### ABOVE GROUND STORAGE TANKS

Is there any related underground piping?  Yes  No If yes, please complete piping section below.

TANK #	YEAR INSTALLED	CAPACITY (litres)	TANK CONSTRUCTION (double wall or single wall)	TANK CONSTRUCTION MATERIAL (see below)	CONTENTS (see below)	REG. COMP.* (YES/NO)	LEAK DETECTION (see below)	BASE CONSTRUCTION (see below)	DIKING CONSTRUCTION (see below)	OVERFILL PROTECTION (YES/NO)	PROTECTION FROM VEHICLE IMPACT (YES/NO)

### UNDERGROUND STORAGE TANKS

TANK INFORMATION							
TANK #	YEAR INSTALLED	CAPACITY (litres)	TANK CONSTRUCTION (double wall or single wall)	TANK CONSTRUCTION MATERIAL (see below)	CONTENTS (see below)	REG. COMP.* (YES/NO)	LEAK DETECTION (see below)

PIPING INFORMATION			
YEAR PIPING INSTALLED	PIPING CONSTR (double wall or single wall)	PIPING CONSTRUCTION MATERIAL (see below)	PIPING LEAK DETEC. (see below)

#### TANK AND PIPING CONSTRUCTION MATERIAL BASE AND DIKING CONSTRUCTION

- F = FIBREGLASS
- I = IMPERMEABLE (concrete, clay synthetic)
- FRB = FIBREGLASS REINFORCED PLASTIC
- P = PERMEABLE (dirt, earth, gravel)
- FCL = FIBREGLASS CLAD STEEL
- N = NONE
- CPS = CATHODICALLY PROTECTED STEEL
- PCL = POLYETHYLENE CLAD STEEL
- S = UNPROTECTED STEEL
- R = RELINED (INTERNALLY)

#### CONTENTS

- R = REG. GASOLINE
- E = ETHANOL
- D = DIESEL
- NO = NEW OIL
- WO = WASTE OIL
- K = KEROSENE

#### LEAK DETECTION

- DW = INTERSTITIAL MONITORING
- ATG = AUTOMATIC TANK GAUGING
- VW = VAPOUR MONITORING WELLS
- GW = GROUND WATER MONITORING WELLS
- SIR = STATISTICAL INVENTORY RECONCILIATION
- MTG = MANUAL TANK GAUGING
- VIS = VISUAL INSPECTION

\*REGULATORY COMPLIANCE: DENOTES A TANK MEETING PROVINCIAL, TECHNICAL AND LEAK DETECTION STANDARDS.