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Pollution Legal Liability Application

The applicant is responsible for obtaining and reviewing whatever records are available, whether in their possession or in the public domain, which are necessary to answer any of the questions in this application. If necessary, use additional sheets to provide the requested information.

1. Name of Applicant: _____

2. Mailing Address of Applicant: _____

3. Telephone: _____ Fax: _____ Website: _____

4. Please attach the following to this application:

- a. List of the proposed insured property address(es)
- b. 5 year GL/Property loss runs
- c. Operations & maintenance plan
- d. Water intrusion management plan (if applicable)
- e. Subsidiaries or other related entities also requesting coverage
- f. Audited financials for the past two (2) fiscal years
- g. Any environmental site assessment(s) available.

5. Indicate deductible, limit, and policy term options requested:

Deductible: _____ Each Incident Limit: _____ Total All Losses Limit: _____

Policy Term Effective Date: _____ Policy Term Expiration Date: _____

6. Current property uses: _____

7. Is a change in use at any of the properties anticipated during the Policy Term indicated above?

Yes No

8. If yes, please include a description of the future use: _____

9. Prior property uses: _____

10. Describe the use of the surrounding property: _____

11. Are there or were there ever any underground storage tanks located on the property?
Yes No

12. If yes, but are no longer in use, have the tanks been closed in accordance with applicable regulations?
Yes No

13. If yes, please attach evidence of proper closure (NFA letter, closure letters, etc).

14. Are there any above-ground storage tanks on the property?
Yes No

15. If yes, please indicate contents and quality for each tank: _____

16. Are you the owner of the property being submitted?
Yes No

17. If no, please indicate your interest in acquiring coverage for this property. _____

18. Do you have any contracting or other service operations that you conduct outside the boundaries of the proposed Insured Property?
Yes No

19. If yes, please indicate estimated annual revenues for your contracting operations and detail on operations: _____

20. Indoor Air Quality

a. Have any water or indoor air quality related construction/maintenance defects been encountered (including but not limited to HVAC system problems, leaks in the roof, windows or siding, as well as broken plumbing or sewer backups)?
Yes No

b. If yes, what are they and how have they been addressed? _____

c. Any properties located in a 100-year flood plain or an area subject to periodic ponding or flooding?
Yes No

- d. If yes, when was the last time the building was impacted by such ponding or flooding and to what extent?
What precautions are in place to mitigate future damage?

- e. Have any of the buildings had mold growth in which remediation costs exceeded \$25,000?
Yes No

- f. Have any indoor air quality / mold studies or inspections been done?
Yes No If yes, please provide a copy.

- g. Do you have a formal documented complaint procedure in place?
Yes No

- h. Have there been any formal third party complaints for indoor air quality or outbreaks of Legionella pneumophila, at any of the properties?
Yes No

If yes, please attach a full description of each incident including cause of loss, mitigation of loss and any costs associated with the loss.

- i. Indicate detail on water systems at the properties:

- i. Is the property supplied by municipal water?
Yes No

- ii. If not, how is potable water treated for your facility? _____

- iii. How water heater: Date of installation _____ Total capacity (gallons) _____
Usual temperature setting _____°F

- iv. Are there any whirlpools, spas or showers at the facility?
Yes No

- v. If yes, how many? _____

- vi. Does the facility conduct water sampling to detect bacteria growth?
Yes No

21. In the last five years, has the applicant had any reportable releases or spills of hazardous substances, hazardous wastes, or any other pollutants as defined by applicable environmental statutes or regulations?
Yes No

22. In the last five years, has the applicant been prosecuted or is the applicant currently being prosecuted for contravention of any standard or law relating to the release or threatened release of a hazardous substance, hazardous waste or other pollutant as defined by applicable environmental statutes or regulations?
Yes No

23. List all claims made against the applicant during the past five years for clean-up or response action, "toxic tort" or other bodily injury, or property damage, resulting from the release of hazardous substances, hazardous waste, or other pollutants into the environment, from this location or other locations owned or operated by the applicant. Attach a brief description of the claim(s) and their disposition.

None to report

For the purpose of Question 24. below, "YOU" means the manager or supervisor of the applicant responsible for environmental affairs, control or compliance, or any manager of the location(s) which is the subject of this application, or any officer, director or partner of the applicant.

24. 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 or claims being asserted against your company for environmental clean-up, or for bodily injury or property damage arising from the release of pollutants into the environment?

Yes No

25. If you answered "yes" to question 21, 22, 23 or 24 above, please provide details on the incident or claim and what measures you have taken to prevent a future incident or claim.

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated.

Completion of this form does not bind coverage. Applicant's acceptance of Company's quotation and Company's written agreement to be bound are required to bind coverage and to issue a policy. It is agreed that this form shall be the basis of the contract should a policy be issued, and will be attached to the policy and made a part thereof.

All written statements and materials furnished to the Company in conjunction with this application are hereby incorporated by reference into this application and made a part hereof.

If an order to bind coverage is received, the application will be attached to the policy so it is necessary that all questions be answered in detail.

The applicant understands and recognized that this Policy is issued based upon the Company's reliance on the accuracy of the information disclosed and the truth of the statements made herein and in the disclosure process. The applicant further recognizes that any breach of the foregoing warranties could have a material adverse effect on the Company.

The applicant further declares, warrants and represents that if the information supplied on this application changes between the date of this application and the time when the policy is issued, the applicant will immediately notify the company of such

changes, and the Company may withdraw or modify any outstanding quotations and/or authorization or agreement to bring the insurance.

I hereby certify to the truth of the foregoing and that I am authorized to execute the foregoing warranty and representation on behalf of the applicant.

Signature of officer of owner: _____ Date: _____

Print Name and Title: _____

Brokerage firm: _____

Address of brokerage firm: _____

Email address of brokerage firm: _____