agile Underwriting Solutions

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Daycare Application

Applicant Information

1. Named insured: _____ Operating name: _____
2. Mailing address: _____
3. Daycare risk address: _____
4. Phone: _____ Email: _____
5, Website / social media page(s): _____
6. Requested effective date: _____

Operation, Experience & Licensing

1. Operation: ☐ Licensed home daycare ☐ Unlicensed home daycare ☐ Agency-supervised
   ☐ Before/after school ☐ Other (please describe): _____
2. Years in business: _____ Childcare experience (years): _____
3. Hours/days of operation: _____
4. Province: _____ License/agency number: _____
5. Licensed/approved capacity: _____ Expiry date: _____
6. Is the operation currently within all applicable provincial licensing and child-count requirements? ○ Yes ○ No
7. Has any licence/approval ever been suspended, revoked, restricted, or has the operation been shut down? ○ Yes ○ No
8. Is any overnight care provided? If **yes**, describe frequency and supervision below. ○ Yes ○ No

_____

_____

New Ventures: Attach the operator resume, written daycare policies, and parent/guardian contract. At least three years of relevant childcare experience is required for program consideration.

Children, Staffing & Qualifications

1. List the maximum number of children at any one time:

Age group	Daycare children	Operator's own children present
Under 1 year		
1 to under 2 years		
2 to under 5 years		
5 to 12 years		
Total		

2. Maximum children present at one time: _____ Employees: _____ Volunteers: _____

   ECE-qualified caregivers: _____ Caregivers with current First Aid/CPR: _____

3. Are any children accepted who require special medical, developmental, physical, or behavioural supports? ◯ Yes ◯ No

4. Are staffing and supervision levels adjusted for the number, age and individual needs of children in care? ◯ Yes ◯ No

   If **yes** to either above, please describe needs, separate supervision arrangements, and staff qualifications:

Screening, Policies & Daily Controls

1. Before working with children, do all staff and volunteers complete criminal record and vulnerable sector checks? ◯ Yes ◯ No
2. Are those checks renewed at least every three years for all current staff and volunteers? ◯ Yes ◯ No
3. Are reference checks completed and documented for every new employee or volunteer? ◯ Yes ◯ No
4. Do all caregivers maintain current First Aid/CPR training? ◯ Yes ◯ No
5. Are written policies maintained for illness, allergies, food safety, medication, and emergency response? ◯ Yes ◯ No
6. Are written incident records kept for every injury or event involving a child and communicated to parents? ◯ Yes ◯ No
7. Are parent-signed emergency medical authorization and authorized pick-up records maintained? ◯ Yes ◯ No
8. Is medication given only under written parent/guardian authorization with administration records retained? ◯ Yes ◯ No

   If **no** to any above, please explain:

Premises, Play Areas & Fire Safety

1. Are childcare areas, exits, stairs, electrical outlets, cleaning products, medicines, and other hazards secured? ◯ Yes ◯ No
2. Is the outdoor play area fenced with a secure gate and is playground equipment age-appropriate with impact surfacing? ◯ Yes ◯ No
3. Are smoke/CO alarms and fire extinguishers maintained, and are evacuation drills conducted and documented? ◯ Yes ◯ No
4. Is there any trampoline, bouncy castle, indoor play gym, or climbing wall on the premises? ◯ Yes ◯ No

   If **yes**, please provide details:

6. Provide details of playground equipment and fire protection:

Pool & Animal Exposures

1. Is there a swimming pool, hot tub, pond, or other water feature on the premises? ○ Yes ○ No
2. If a pool exists, is it fully fenced with locked, self-closing and self-latching access, separate from daycare play areas? ○ Yes ○ No
3. If a pool exists, is use by daycare children prohibited and is rescue equipment immediately available? ○ Yes ○ No
4. Are any dogs or other animals kept on the premises? ○ Yes ○ No
5. If animals are present, are they securely separated from childcare areas throughout daycare hours? ○ Yes ○ No
6. Has any animal shown aggressive behaviour, bitten, attacked, or caused injury? ○ Yes ○ No
7. Provide applicable pool details and/or animal type/breed, controls, and history:

Transportation & Off-Premises Activities

1. Do the operator, employees or volunteers transport children in owned, personal, rented, or hired vehicles? ○ Yes ○ No
2. Is any pick-up or drop-off service provided? ○ Yes ○ No
3. Are field trips, playground visits, or other off-premises activities conducted? ○ Yes ○ No
4. Frequency: ☐ Rare ☐ Monthly ☐ Weekly ☐ Daily
5. Number/type of vehicles: _____ Auto liability limits: $ _____ per vehicle
6. Activities/destinations: _____
7. Describe transportation authorization, drivers, restraints, vehicle ownership, and activity supervision:

Abuse Prevention & Client Controls

1. Is there a written abuse prevention, recognition, and mandatory reporting policy? ○ Yes ○ No
2. Are all staff and volunteers trained on abuse prevention, boundaries, and reporting obligations before duties begin? ○ Yes ○ No
3. Are new or unscreened staff prohibited from being alone with children? ○ Yes ○ No
4. Is a written parent/guardian service contract used for every child? ○ Yes ○ No

If **no** to any above, please explain:

_____

_____

_____

Claims, Insurance & Coverage Required

1. Have there been any claims, losses, or reported incidents during the past five years? ○ Yes ○ No

   If **yes, attach full details,** including dates, status, amounts paid/reserved, and five-year loss runs.
2. Are you aware of any fact, complaint, incident, or circumstance that could reasonably give rise to a claim? ○ Yes ○ No
3. Has insurance ever been cancelled, declined, or non-renewed, other than for market withdrawal? ○ Yes ○ No

   If **yes**, please provide details:

_____

_____

_____

4. Current insurer: _____ Expiry: _____
5. Current liability limit: $ _____ Premium: $ _____
6. CGL requested: ☐ $1M ☐ $2M ☐ $5M Non-owned auto requested: ☐ $1M ☐ $2M ☐ $5M

Required Attachments

Attach as applicable:

- ☐ Resume
- ☐ Daycare policies
- ☐ Parent/guardian contract
- ☐ Licence/agency approval
- ☐ Five-year loss runs
- ☐ Additional explanations

Declaration

I/we declare that to the best of my/our knowledge and belief the answers given on this application whether by me/us or on my/our behalf are complete and true and that I/we have not withheld any material information.

I/we will undertake to inform Agile of any material alteration to these facts occurring before completion of the contract.

I/we agree this application, together with any other material information supplied, will form the basis of any contract of insurance.

If this application has been completed on my/our behalf by a third party, I/we agree that the third party is deemed to be my/our agent and not an agent for the Insurer and I/we have read the information provided before signing the form.

Applicant's Signature	Date
Company Name (if applicable)	Title/Position (if applicable)

Broker Information

Company Name: _____ Website: _____

Address: _____

Phone Number: _____ Fax Number: _____

Broker's Name: _____ Email: _____

Broker's Signature	Date