

Residential Oil Tank Application

Applicant Information

1. Named Insured: _____
2. Mailing Address: _____
3. Telephone: _____ Email: _____
4. Risk Location: _____

Oil Tank Details

Please complete the following oil tank questions and **provide a photo of the oil tank**.

1. Make and model of oil tank: _____
2. Year oil tank was manufactured: _____
3. Oil tank type: ☐ Steel ☐ Fibreglass
3. Oil tank wall construction: ☐ Single Wall ☐ Double Wall
4. Oil tank capacity: _____
5. Location of oil tank: ☐ Aboveground Outside ☐ Underground Outside ☐ Inside Dwelling
6. Oil tank support: ☐ Concrete Slab ☐ Concrete Block ☐ Wood
7. Is the oil tank serviced annually? ☐ Yes ☐ No Date of last service: _____
8. Confirm the tank:
 - a. has a clear space all around ☐ Yes ☐ No
 - b. is clear of all clutter ☐ Yes ☐ No
 - c. is not leaning against a building or other structure ☐ Yes ☐ No
9. Is the oil tank filled regularly? ☐ Yes ☐ No How Often? _____
10. Does the oil tank meet all provincial regulations? ☐ Yes ☐ No

Claims / Circumstances

1. Have you in the last five (5) years:
 - a. had any reportable releases or spills of hazardous waste or any other pollutants, as defined by applicable environmental statutes or regulations; or
 - b. been in breach of or non-compliant with any environmental license or permit issued to you?☐ Yes ☐ No

If **yes**, please describe and provide further documentation where possible:

2. Have you in the last five (5) years been prosecuted or threatened with prosecutions or are you currently being prosecuted for any offence directly or indirectly arising out of a release of pollutants into any surface water, air, or into land or groundwater?

☐ Yes ☐ No

If **yes**, please describe and provide further documentation where possible:

3. List all claims made against you during the last five (5) years for clean-up costs, bodily injury, or property damage resulting from the release of hazardous substances, hazardous waste, or other pollutants.

4. At the time of signing this application, 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 costs, bodily injury, or property damage arising from a release of pollutants?

☐ Yes ☐ No

If **yes**, please describe:

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.

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
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Broker Information

Company Name: _____ Website: _____

Address: _____

Phone Number: _____ Fax Number: _____

Broker's Name: _____ Email: _____

Broker's Signature	Date
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