

**LIMITED POLLUTION LIABILITY
INSURANCE QUESTIONNAIRE**

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DATE:

D	D	M	M	Y	Y
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Name of Applicant _____

Nature of Business _____

Limits of Insurance

Incident	Aggregate	Deductible Amount
\$	\$	\$

Gross Annual Receipts _____ (Dollar value) Total number of Acres _____ (Farms only)

Are there any Government statutes, standards, or other city or provincial regulations for the protection of the environment with which you do not comply? Yes No

If Yes, please provide details.

If additional space is needed to answer any questions, please use the blank page included with this form on page 5.

Have there been any changes in your operation during the last five years that have altered (lessened or increased) the risk of a pollution incident? Yes No

If Yes, please provide details.

Indicate the type of land use and occupancy in an approximate 1km radius of your operation. Check as many as are applicable.

- | | | |
|----------------------------|----------------------------------|----------------------------|
| _____ Heavy Industrial | _____ Light Industrial | _____ Commercial |
| _____ Apartments | _____ Single Family Housing | _____ Densely Populated |
| _____ Moderately Populated | _____ Lightly Populated | _____ Barren or Unoccupied |
| _____ Agricultural | _____ Parks and Recreation Areas | _____ Other |

Identify by name any body of water or water course within one (1) km radius of your location and indicate the approximate distance.

Body of Water _____ Distance from operations _____

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List all raw materials utilized in process, all intermediate and end products.

Name	Gas, Solid, Granular or Liquid	Quantity on Hand	Type of Container	Volume of Largest Container	Underground Yes/No	If above ground is it dyked or undyked

Description of Operations Conducted by the Applicant

Answer Yes or No to each of the following. All questions must be answered.

Do You:

- Discharge to water or land? Yes No Attach copy of permit
- Discharge to a sewer system other than sanitary waste? Yes No Attach copy of permit
- Discharge to air? Yes No Attach copy of permit
- Operate air pollution control equipment? Yes No Attach copy of permit
- Utilize solvents, degreasers, paints or other volatile organic chemicals ? Yes No
- Generate hazardous waste? Yes No
- Store or apply pesticides, insecticides or herbicides? Yes No
- Utilize compressed gases other than air? Yes No List on tank data supplement

Do You Have:

- Underground tanks? Yes No List on tank data supplement
- Above ground tanks located outdoors? Yes No List on tank data supplement
- Any tanks located indoors? Yes No List on tank data supplement
- Waste pits, sumps, vaults or drains? Yes No
- Incinerator? Yes No
- Polychlorinated Biphenyls (PCB's) used or stored? Yes No List amounts, where and how stored.

Permission to Discharge to the Environment

Attach a copy of every application made on behalf of your operation to a government authority in request for a permit to emit or discharge any contaminant in any amount concentration or level in excess of that prescribed by the regulations. Also provide a copy of any documentation evidencing approval granted by government authority related to these activities

Claim or Loss Experience

List and describe all pollution or environmental damage claims (including unpaid claims or complaints) which have occurred in the past five years. Included claims for which no insurance was purchased.

Previous Events

List all events in the past five years, which in your view could have led to a pollution incident. Exclude any mentioned above.

Has Pollution coverage been declined in the past? Yes No

If Yes, please provide details.

Do you have pollution liability coverage currently in effect? Yes No

If Yes, please provide details.

_____ Company Name

_____ Policy Number

Expiry Date:

D	D	M	M	Y	Y
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TANK DATA SUPPLEMENT

Although information is required on all tanks, no underground piping or tanks are covered by the Policy.

Instructions for Completion:

Product stored - Give generic name not product or trade names

Tank construction - Use symbol as shown below

- W - Welded Steel
- R - Riveted
- B - Bolted
- F - Fiberglass
- L - Lined

Example: A lead lined welded steel tank used for acid storage should show as WL

Is there a written tank filling procedure containing information to prevent spills and overflows? Yes No

Is there a written emergency procedure outlining actions to be taken in the event of a tank spill or overflow? Yes No

Location: _____

Tank No.	Product Stored	Capacity in 1000 Litres	Above or below ground	Indoors or Outdoors	Construction	Age	Dyked for above ground	High level alarm

I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND ACCURATE AND APPLY FOR A CONTRACT OF INSURANCE BASED UPON THE TRUTH OF THE STATEMENTS.

Print Name and Title _____

Signature of Applicant or Authorized Representative _____

DATE:

D	D	M	M	Y	Y
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Additional Information related to Application