Vailo

Pollution Liability Application

Contractors and Construction Professionals

Vailo Insurance Services Ltd

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APPLICATION FOR INSURANCE (continued from previous page)

Copies of the following must be enclosed with this application:
(a) resumes / Cvs of principals, partners and senior staff members
(b) brochures and/or promotional literature of website address

1. (a) Name of Applicant(s):

(b) Mailing Address:

(c) Website Address:

(d) Date Established (Month/Day/Year):

(e) Applicant is: ☐ Individual ☐ Partnership ☐ Corporation

(f) Location(s) of branch office(s):

2. (a) Limit of Liability required: ☐ $1,000,000 ☐ $2,000,000 ☐ $5,000,000 ☐ Other:

(b) Deductible: ☐ $2,500 ☐ $5,000 ☐ $10,000 ☐ Other:

3. (a) Number of Employees: Canada: USA: Other:

4. Please indicate professional society memberships:

5. Operations and Revenue Profile

Environmental Operations	Gross Revenue performed in the last 12 months	Gross Revenue projected for the next 12 months	Projected percentage to be sublet
Abatement: Asbestos/Lead	$	$	%
Abatement: Mould	$	$	%
Barrier/Liner Contractors	$	$	%
Dredging	$	$	%
Emergency Haz Material Cleanup	$	$	%
Groundwater Sampling	$	$	%
Groundwater Treatment and Recovery	$	$	%
Haz Material Cleanup, Soil Excavation	$	$	%
Hydrocarbon or Chemical Recycling/ Recovery	$	$	%
Mobile Incinerators	$	$	%
On-site Haz Waste Treatment	$	$	%
PCB Oil/Equipment Retrofill and Removal	$	$	%
Soil Sampling	$	$	%
Tank Removal/Installation	$	$	%
Waste Storage	$	$	%
Other (explain)	$	$	%

Non-Environmental Operations	Gross Revenue performed in the last 12 months	Gross Revenue projected for the next 12 months	Projected percentage to be sublet
Carpentry	$	$	%
Construction Management	$	$	%
Demolition/Dismantling	$	$	%
Drilling	$	$	%
Electrical	$	$	%
Excavation (Non Haz)/Grading	$	$	%
General Contracting	$	$	%
Home Builders, Developers	$	$	%
HVAC/Mechanical	$	$	%
Industrial Cleaners (incl. Sewer/Septic	$	$	%

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5. Operations and Revenue Profile

Non-Environmental Operations	Gross Revenue performed in the last 12 months	Gross Revenue projected for the next 12 months	Projected percentage to be sublet
Insulation	$	$	%
Logging	$	$	%
Masonry/Concrete	$	$	%
Marine	$	$	%
Oil Lease	$	$	%
Operations and Maintenance	$	$	%
Painting	$	$	%
Pesticide, Herbicide, Fungicide, Fertilizer application	$	$	%
Pipeline Construction/Cleaners	$	$	%
Plumbing	$	$	%
Roofing	$	$	%
Steel Erection	$	$	%
Street and Road Construction	$	$	%
Other (explain)	$	$	%

6. Please provide a percentage of total revenue by client type (total should equal 100%):

Industrial (water treatment plants, pipeline, processing plants, etc.): _____%

Infrastructure (bridges, roads, landfill, etc.): _____%

Residential (condos, apartments, homes, etc.): _____%

Institutional/Public (hospitals, nursing homes, schools, hotels, etc.): _____%

Commercial (malls, offices, warehouses, etc.): _____%

Other, please list: _____%

Total _____%

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6. If the applicant provides their services to clients outside of Canada, please state the percentage and describe the services provided:

Type of Service	Country	% of Revenue

7. List the company's five largest customers and provide a description of the products/services provided (including contract value):

Customer Name	Services Provided	Project Value	Fees Earned

8. Does the applicant operate under a written contract? ☐ Yes ☐ No ☐ Majority of the Time

9. Does the Applicant require every subcontractor to carry their own Insurance? ☐ Yes ☐ No

10. (a) Does the Applicant have a written Health and Safety Manual for all employees? ☐ Yes ☐ No

(b) Does the Applicant have a written Spill Prevention, Control and Containment Plan? ☐ Yes ☐ No

(c) What protocol is in place for the handling, temporary storage and protection from weather of waste materials at a job site?

(d) Does the Applicant select or recommend storage, landfill or disposal locations for waste materials on behalf of the client? ☐ Yes ☐ No

(e) Does the Applicant confirm that the location is licensed to accept the waste materials? ☐ Yes ☐ No

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11. Incidental Transit Information

(a) Total number of vehicles hauling contaminated materials?

(i) 4,500 kg or less: _____ (ii) over 4,500 kg: _____

(b) What type of contaminated materials is hauled?

(c) How is the cargo transported? ☐ Container ☐ Bulk Maximum radius of operations?

(d) How often and for what types of projects does the Applicant assume responsibility for transportation?

(e) How often does the Applicant hire third party transportation companies to haul contaminated materials on the Applicant's behalf?

(f) Does the Applicant have a Vehicle Maintenance Program in place for all vehicles? ☐ Yes ☐ No

(g) Does the Applicant have an Automobile Safety and Training Program for all employees? ☐ Yes ☐ No

(h) Does the Applicant obtain annual driver abstracts for all employees operating the Applicant's vehicles? ☐ Yes ☐ No

(i) How often does the Applicant hire third party transportation companies to haul contaminated materials on the Applicant's behalf?

12. (a) Please provide the following details of all Contractors Pollution Liability Insurance carried in the past three years:

Insurer	Expiry Date	Limit	Deductible	Premium
		$	$	$
		$	$	$
		$	$	$

(b) When was the first date on which the Applicant purchased continuous claims made coverage?

(c) Has the Applicant ever been declined, non-renewed or cancelled by any insurer for Contractors Pollution Liability Insurance?

☐ Yes ☐ No If YES, please explain:

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13. In the last five years, has the Applicant ever had a claim made against them? If YES, please provide the following details on a separate page, and include: ☐ Yes ☐ No

(a) Date of Claim

(b) Claimant's Name

(c) Nature of Claim

(d) Amount of Indemnity Payment and Defence Costs

14. Is the Applicant aware of any fact, circumstance or situation which could result in a claim being made against the Applicant or any other person/entity for whom coverage is being sought?

☐ Yes ☐ No If YES, please explain:

APPLICANT'S CONSENT TO THE TRANSMISSION OF THE INFORMATION CONTAINED IN THE APPLICATION FORM

I hereby acknowledge that the information collected in the Application form is acquired by my insurance broker to be transmitted to Vailo Insurance Services Inc. for the sole purpose of obtaining an insurance policy, and will be kept confidential.

Moreover, I authorize Vailo Insurance Services Ltd., its insurers or service providers to:

- Conduct verification, using outside sources, of the information contained in the Application form, in attached documentation and in subsequently provided documentation.
- In the event of a claim, transmit the submitted and verified information to loss adjusters, lawyers or other similar offices for the purpose of investigating, defending, negotiating or settling any claims as required.

DECLARATION AND SIGNATURE

The undersigned Applicant for this insurance declares that, to the best of their knowledge and belief, the statements set forth herein are true and correct and that reasonable efforts have been made to obtain sufficient information to facilitate the proper and accurate completion of this Application form. The undersigned further agrees that if any significant change in the condition of the Applicant is discovered between the date of this Application form and the effective date of the policy, which would render this Application form inaccurate or incomplete, notice of such change will be reported immediately in writing to the Insurance Manager.

Although the signing of this Application form does not bind the Applicant to purchase the insurance, the undersigned Applicant agrees that this form and the information furnished pursuant hereto shall be the basis of the contract should a policy be issued and this form will become part of the policy.

Name of Applicant (please print)

Title of Applicant (please print)

Signature of Applicant

Date (dd/mm/yyyy)