**APPLICANT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Policy number: |  | |  | | | |
| Name of applicant: |  | | | | | |
|  |  | | | | | |
| Mailing address: |  | | | | | |
|  | *Civic number, street* |  | |  |  |  |
| Website: | *City* |  | | *Prov.* |  | *Postal code* |
|  |  |  | |  |  |  |

**RENEWAL INFORMATION**

|  |  |  |
| --- | --- | --- |
| Has there been any change in ownership, management or operations in the past 12 months? | | Yes  No |
| If **YES**, provide details: |  | |
| Has there been any change in schedule of locations? | | Yes  No |
| If **YES**, provide details: |  | |
| Are there significant changes in the risk that may influence the risk analysis? | | Yes  No |
| If **YES**, provide details: |  | |
|  | | |
|  | | |
| Is the applicant a member of a professional association? | | Yes  No |
| If **YES**, specify: |  | |

**REVENUE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Revenue for the last 12 months: | $ |  | Payroll for the last 12 months: | $ |
| If your estimated revenue differs greatly from your actual revenue, please provide reason for expected increase or decrease: | | | | |
|  | | | | |
|  | | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Please fill in the appropriate categories** | | | | | | | | |
| **Code** |  | **Description of activities or services** |  | **Expected revenue** |  | **Expected wages** |  | **Nb of employees** |
| 1711 |  | Plumbing contractor |  | $ |  | $ |  |  |
| 1714 |  | Sprinkler systems contractor |  | $ |  | $ |  |  |
| 1715 |  | Ventilation and air conditioning contractor |  | $ |  | $ |  |  |
| 1731A |  | Electrical wiring Incl. CCTV, home automation and card access |  | $ |  | $ |  |  |
| 1731B |  | Electrical contractor - Industrial installations |  | $ |  | $ |  |  |
| 1731C |  | Electrical contractor - Residential installations |  | $ |  | $ |  |  |
| 1781A |  | Fire extinguishing equipment NOT sprinklers |  | $ |  | $ |  |  |
| 5718A |  | Central vacuum, intercoms, phones, audio systems |  | $ |  | $ |  |  |
| 7396A |  | Alarm systems dealer package |  | $ |  | $ |  |  |
| 7396B |  | Alarm systems installations/maintenance |  | $ |  | $ |  |  |
| 7396C |  | Alarm monitoring |  | $ |  | $ |  |  |
| 7396D |  | Telephone answering including paging |  | $ |  | $ |  |  |
| 7396E |  | Alarm monitoring - Sub-contracted |  | $ |  | $ |  |  |
| 7403A |  | Security guard - Static Type 4 |  | $ |  | $ |  |  |
| 7403B |  | Security guard including alarm response and dogs |  | $ |  | $ |  |  |
| 7403C |  | Security guard - Retail store security |  | $ |  | $ |  |  |
| 7403D |  | Security guard - Special events and concerts |  | $ |  | $ |  |  |
| 7403F |  | Concierge services |  | $ |  | $ |  |  |
| 7403G |  | Private Investigator |  | $ |  | $ |  |  |
| 7693A |  | Locksmithing |  | $ |  | $ |  |  |
| Other: |  |  |  | $ |  | $ |  |  |
|  |  | Totals : |  | $ |  | $ |  |  |

**SERVICE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Does the applicant provide any services at airports?** | | | | | | Yes  No |
| If **YES**, specify: |  |  | Revenue : |  | $ | |
| **Does the applicant sell or have any plans to sell products or services in outside Canada?** | | | | | | Yes  No |
| If **YES**, specify: |  | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Does the applicant use sub-contractors?** | | | | | | | | | | | | | Yes  No |
| If **YES**, provide revenue: |  | $ | | |  | Is the revenue included in the table above? | | | | | |  | Yes  No |
| Detail the sub-contracted services: | | | | | |  | | | | | | | |
|  | | | | | | | | | | | | | |
| Does the applicant request proof of insurance from sub-contractors? | | | | | | | | | | | Yes  No | | |
| If **YES**, minimum limit required: | | | | | | $ | | | | | | | |
| **Does the applicant provide services for any of the following activities?** | | | | | | | | | | | | | | |
|  | | |  |  | | |  | **Revenue** |  | **Details** | | | | |
| Design or consulting services for third party | | |  | Yes  No | | |  | $ |  |  | | | | |
| Passenger or luggage screening or security | | |  | Yes  No | | |  | $ |  |  | | | | |
| Installation or car alarms or GPS tracking systems | | |  | Yes  No | | |  | $ |  |  | | | | |
| Installation or monitoring of temperature alarms | | |  | Yes  No | | |  | $ |  |  | | | | |
| Security for entertainment facilities, bars or night clubs | | |  | Yes  No | | |  | $ |  |  | | | | |
| Security for strikes or labour unrest | | |  | Yes  No | | |  | $ |  |  | | | | |
| V.I.P. protection | | |  | Yes  No | | |  | $ |  |  | | | | |
| Fire protection for aircraft, watercraft or mobile equipment | | |  | Yes  No | | |  | $ |  |  | | | | |
| Emergency 911 telephone answering | | |  | Yes  No | | |  | $ |  |  | | | | |
| Bailiff services | | |  | Yes  No | | |  | $ |  |  | | | | |
| Money transport | | |  | Yes  No | | |  | $ |  |  | | | | |
| All kinds of services for sawmills | | |  | Yes  No | | |  | $ |  |  | | | | |
| Others : | | |  | Yes  No | | |  | $ |  |  | | | | |

**DETAILS OF REQUIRED COVERAGE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Same limit and deductible as on the expiring policy? | | | | | | Yes  No |
| If **NO**, specify the required limit: | $ |  | Deductible : | $ | |

**ADDITIONAL INFORMATION**

|  |  |
| --- | --- |
|  | |
| Have owners ever been prosecuted under criminal laws? | Yes  No |
| If **YES**, join copy of criminal record. | |

**STATEMENT**

|  |  |  |
| --- | --- | --- |
| THE APPLICANT CERTIFIES THAT THE ABOVE STATEMENTS AND FACTS ARE TRUE AND THAT NO INFORMATION HAS BEEN SUPPRESSED OR MISSTATED. | | |
|  |  |  |
| *Signature of applicant*  If signed in the name of a company, indicate the position occupied: |  | *MM/DD/YY* |
| **The application must be signed by an officer, a director of the applicant Named Insured.** | | |
|  |  |  |

To send your quote request or to contact our team, write us at: [mtl.cgl@tottengroup.com](mailto:tot.cgl@tottengroup.com) .  
Our team will be happy to see if we can help you with your risk!