



Rented Student Condo Application

ABEX Affiliated Brokers Exchange Inc.
231 Shearson Cres., Suite 304
Cambridge, ON N1T 1J5
(p)519-880-0044
quotes@abexinsurance.com
www.abexinsurance.com

Is this a short-term condo rental? Yes No If 'yes', please complete Rented Short-Term Condo Application found at www.abexinsurance.com/applications

Brokerage:			Broker code:	Broker contact:																		
Broker address:			Email:																			
Named Insured:			Principal(s):																			
Mailing address:																						
Location address:																						
Mortgagee(s):																						
Mortgagee(s) address:																						
Effective date:			Policy term:																			
Prior insurance & expiry date:			Other policies with ABEX:																			
1. Underwriting Details				Yes No																		
Is Condo Corporation registered?		Does the insured own the condo unit?		Has applicant ever had insurance declined or cancelled? <i>If 'yes', please explain in 'Comments'</i>																		
Will the insured occupy the premises?		Is there an annual lease in place?		Hydrant within 300 meters?																		
Are any of tenants currently in arrears with their rent payment? <i>If 'yes', please explain in 'Comments'</i>		Yes	No	Firehall within 8 Kms?																		
Is Insured currently involved in any proceedings or awaiting any proceedings with the Rent Control Board? <i>If 'yes', explain in 'Comments'</i>		Yes	No	Is it a voluntary firehall?																		
Building type (single family, row house etc):		Total number of kitchens:	Total number of students:	Min. one (1) smoke detector per floor?																		
Do local by-laws require student housing to be licensed?		Yes	No	Is there a woodstove on the premises?																		
Is the dwelling licensed for student housing?		Yes	No	Is this a fraternity house?																		
Who is responsible for snow removal?				Is there a pool and/or hot tub located on the premises?																		
If tenant is responsible for snow removal, is there a separate agreement in place?				Is the risk located in an active flood zone? <i>If 'yes', we'd decline.</i>																		
If the applicant DOES NOT live within 250 kms of the property, who will be responsible for maintaining the property?				Is the risk located within 50 kms of an active fire zone? <i>If 'yes', we'd decline.</i>																		
				Does the risk meet local Fire Code & By-law requirements for its current occupancy?																		
2. Construction Details				Is this leased land?																		
Year built		Unit area in sq. feet		<table><tr><td>3. Private Protections</td><td>Yes</td><td>No</td></tr><tr><td>Fire Alarm</td><td></td><td></td></tr><tr><td>Burglar Alarm</td><td></td><td></td></tr><tr><td>Monitored</td><td></td><td></td></tr><tr><td>Sprinklered</td><td></td><td></td></tr><tr><td>On-Site Security</td><td></td><td></td></tr></table>	3. Private Protections	Yes	No	Fire Alarm			Burglar Alarm			Monitored			Sprinklered			On-Site Security		
3. Private Protections	Yes	No																				
Fire Alarm																						
Burglar Alarm																						
Monitored																						
Sprinklered																						
On-Site Security																						
No of Stories		Construction																				
	Type	Year Updated																				
Electrical Wiring & Amperage																						
Breakers or Fuses																						
Plumbing																						
Heating																						
Supplementary Heating																						
Roof																						
				4. Comments:																		

5. Have there been losses or claims by the applicant in the last 5 years?					Yes	No
Date of loss	Detailed description of loss	Amount paid	Open/Closed?	Preventative measures in place?		
6. Coverage		Limits Required		Deductible		
Contents <i>Minimum limit \$25,000</i>						
Improvements/Betterments*** <i>Minimum limit \$25,000</i>						
Loss Assessment		\$25,000				
Unit Owners Contingent Coverage		250% of Contents limit				
Sewer Backup						
Rental Income						
Liability (CGL)						
Review condo corporation by-laws to see what the unit owner is responsible to cover under Improvements/Betterments						
7. Additional comments:						

Declaration: I/we declare that after proper enquiry the statements and particulars given above are true and that I/we have not mis-stated or suppressed any material fact. I/we agree that this Application Form, together with any other material information supplied by me/us shall form the basis of any contract of insurance affected thereon. I/we undertake to inform Underwriters of any material alteration to these facts occurring before the completion of the contract. I/we authorize you to collect, use and disclose personal information as permitted by law, in connection with your commercial insurance policy or a renewal, extension or variation thereof, for the purposes necessary to assess the risk, investigate and settle claims, and detect and prevent fraud, such as credit information and claims history.

Signature(s) of All Named Insureds (only required if binding):	Full Name(s):
Position(s) Held at Insured:	Date:

Absolutely NO COVERAGE is given by this application form. Coverage is only given upon written confirmation of binding from ABEX.

This Section is For Broker Use Only

*

* If clicking on **Submit** button above doesn't bring up a new email with this application attached to it, please try using a different browser or save and email the application to **quotes@abexinsurance.com**