



Rented Short-Term Condo Application

ABEX Affiliated Brokers Exchange Inc.
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Is this off-campus housing? Yes No If 'yes', please complete Rented Student Condo Application found at www.abexinsurance.com/applications

Brokerage:	Broker contact:
Broker address:	Email:
Named Insured:	Broker code:
Mailing address:	Effective date:
	Policy term:
Location address:	
Loss payee(s):	
Loss payee(s) address:	
Other policies with ABEX:	Prior insurance & expiry date:

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>	
Building type (single family, row house etc):		Hydrant within 300 meters?	
Is there an annual lease in place?		Firehall within 8 Kms?	
How many weeks will the premises be rented?		Is it a voluntary firehall?	
Will the insured occupy the premises?	How often?	Min. one (1) smoke detector per floor?	
Is the risk visited a minimum of once every 7 days?		Are tenants over the age of 25 (other than accompanied minors)?	
Total number of units:	Total number of tenants:	Is there a hot tub located on the premises?	
Who is responsible for snow removal?		Is there a pool located on the premises? <i>If 'yes', we decline rentals with pools.</i>	
If tenant is responsible for snow removal, is there a separate agreement?		Is the lot bigger than 1 acre? <i>If 'yes', how many acres?</i>	
If the applicant DOES NOT live within 100 kms of the property, who will be responsible for maintaining the property?			
Is the use of watercraft or recreation equipment included with rental?		Is watercraft motorized or un-motorized?	
How does the applicant obtain tenants and what screening process is used?			

Construction Details			Private Protections	Yes	No
Year built		Building area in sq. feet	Fire Alarm		
No of Stories		Construction	Burglar Alarm		
	Type	Year Updated	Monitored		
Electrical			Sprinklered		
Amperage			On-Site Security		
Plumbing			Comments:		
Heating					
Roof					

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?
Coverage	Limits Required		Deductible	
Contents incl. Improvements/Betterments***				
Loss Assessment	\$25,000			
Unit Owners Contingent	250% of contents limit			
Rental Income				
Liability (CGL)				
Review condo corporation by-laws to see what the unit owner is responsible to cover under Improvements/Betterments				
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

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* If clicking on **Submit** button above doesn't bring up a new email with this application attached to it, please try using Internet Explorer or email the application to quotes@abexinsurance.com or fax it to 1-855-821-7060.