



Vacant Building Application

ABEX Affiliated Brokers Exchange Inc.
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Is the property undergoing any renovation:		Yes	No	If yes, please complete Building Undergoing Renovation application INSTEAD. It can be 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	
Building type (single family, row house etc):			Has applicant ever had insurance declined or cancelled? <i>If 'yes' please explain in 'Comments'</i>			
How long has the risk been vacant:			Hydrant within 300 meters?			
Use / occupancy prior to vacancy?			Firehall within 8 Kms?			
Reason for vacancy?			Is it a voluntary firehall?			
Who is responsible for snow removal?			Will utilities be maintained?			
If the applicant DOES NOT live within 100 kms of the property who will be responsible for maintaining the property?			Is there a sump pump?			
If vacant more than 12 months, what is the property's current market value?			Is there a hot tub on premises?			
Total amount of mortgages/encumbrances: \$			Is there a pool on premises?			
Are any of your mortgages/liens/encumbrances or property tax payments in arrears? Yes No If "yes", the total amount: \$			Is the lot bigger than 1 acre? <i>If 'yes', how many acres?</i>			
Construction Details				Private Protections		Describe future plans for this property:
Year built		Building area in sq. feet		Yes No		
No of Stories		Construction		Fire Alarm		
				Burglar Alarm		
				Monitored		
				Sprinklered		
				On-Site Security		
				Comments:		

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	
Building(s)	\$			
Outbuilding(s) **	\$			
Contents	\$			
Equipment	\$			
Sewer Back Up	\$			
Liability (CGL)	\$			
No cover given for outbuildings unless a limit is shown on the policy.				
Current photos of the risk attached ?	Yes	No	<i>(Current photos and Building Evaluator are not required for quoting, but will be required in order to bind coverage)</i>	
EZ_ITV or equivalent evaluator attached?	Yes	No		
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.