



Rented Commercial Condo Application*

ABEX Affiliated Brokers Exchange Inc.
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*If applying for an off-campus student condo rental or short-term condo rental, please complete our
Rented Student Condo Application or Rented Short-Term Condo Application found at www.abexinsurance.com/applications

Brokerage:		Broker code:	Broker contact:																		
Broker address:		Email:																			
Named Insured(s):		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>																			
Is there an annual lease in place?	Building type (single family, row house etc):	Hydrant within 300 meters?																			
Total number of units:	Total number of tenants:	Firehall within 8 Kms?																			
Are any of tenants currently in arrears with their rent payment? <i>If 'yes', please explain in 'Comments'</i>	Yes No	Is it a voluntary firehall?																			
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	Min. one (1) smoke detector per floor?																			
Type of tenant (e.g. residential, commercial, mercantile). <i>If commercial or mercantile, use the 'Comments' section or separate attachment to provide the full list of tenants.</i>		Is there a pool and/or hot tub located on the premises?																			
		Is the risk located in an active flood zone? <i>If 'yes', we'd decline.</i>																			
Who is responsible for snow removal?		Is the risk located within 50 kms of an active fire zone? <i>If 'yes', we'd decline.</i>																			
If tenant is responsible for snow removal, is there a separate agreement in place?		Does the risk meet local Fire Code & By-law requirements for its current occupancy?																			
If the applicant DOES NOT live within 250 kms of the property, who will be responsible for maintaining the property?		Is this leased land?																			
2. Construction Details		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Private Protections</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <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> </tbody> </table>		Private Protections	Yes	No	Fire Alarm			Burglar Alarm			Monitored			Sprinklered			On-Site Security		
Private Protections	Yes	No																			
Fire Alarm																					
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Sprinklered																					
On-Site Security																					
Year built		Unit area in sq. feet																			
No of Stories		Construction																			
	Type	Year Updated																			
Electrical Wiring & Amperage																					
Breakers or Fuses																					
Plumbing																					
Heating																					
Supplementary Heating																					
Roof																					
3. Comments:																					

4. 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?		
5. Coverage		Limits Required		Deductible		
Contents						
Improvements/Betterments***						
Loss Assessment		\$25,000				
Unit Owners Contingent Coverage		150% 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						
6. 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 a different browser or save and email the application to **quotes@abexinsurance.com**