

## Rented Condo Application\*

ABEX Affiliated Brokers Exchange Inc. 139 Northfield Dr. W., Suite 206 Waterloo, ON N2L 5A6 (p) 519-880-0044 <u>quotes@abexinsurance.com</u> <u>www.abexinsurance.com</u>

\*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:					ı	Email:								
Named Insured(s):					ı	Principal(s):								
Mailing address:						<u> </u>								
Location address	;:													
Mortgagee(s):														
Mortgagee(s) ad	dress:													
Effective date:							Р	olicy te	erm:					
Prior insurance 8	k expiry	date:			Other po	olicies w	with A	ABEX:						
1. Underwriting Details								Yes	No					
Is Condo Corporation registered?						Has applicant ever had insurance declined or								
Does the insured own the condo unit?  Building type (single family, row house etc):							cancelled? If 'yes', please explain in 'Comments'  Hydrant within 300 meters?							
Is there an annual lease in place?  Firehall within 8 Kms?														
Total number of units: Total number of tenants:							Is it a voluntary firehall?							
Is this off campus housing?							Min. one (1) smoke detector per floor?							
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?  If 'yes', we'd decline.														
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? If 'yes', we'd decline.														
Does the risk meet local Fire Code & By-law requirements for its current occupancy?														
Is this leased land?														
2. Construction Details								Г	Private Protections	Yes	No			
Year built			Unit are in sq. fe						Fire Alarm					
No of Stories			Constru						Burglar Alarm					
		Туре		Yea	r Updated				Monitored					
Electrical Wiring Amperage	&								Sprinklered					
Breakers or Fuses								Ĺ	On-Site Security					
Plumbing						ļ								
Heating					Comments:									
Supplementary H	leating													
Roof														

3. 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?				
4. Coverage		Limits Red	quired		Deductible				
Contents  Minimum limit \$	\$10,000								
Improvements/ Minimum limit \$	Betterments*** \$25,000								
Loss Assessme	nt	\$25,000							
Unit Owners Co	ontingent Coverage	250% of Co	ontents 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***									
5. Additional comments:									
suppressed an basis of any co the completion commercial ins	we declare that after proper enquiry the sta y material fact. I/we agree that this Applica ontract of insurance affected thereon. I/we used to of the contract. I/we authorize you to colle surance policy or a renewal, extension or val d prevent fraud, such as credit information a	tion Form, to undertake to ect, use and d riation thered	gether with any inform Underwrisclose persona of, for the purpo	<ul> <li>other material informariters of any material altherial information as permited</li> </ul>	ation supplied by me/us shall form the teration to these facts occurring before ted by law, in connection with your				
Signature(s) of All Named Insureds (only required if binding):				Full Name(s):					
Position(s) F	Held at Insured:		Date:	Date:					
<u> </u>	Absolutely NO C	OVERAGE I	s given hy th	is application form.	Coverage is				

Absolutely <u>NO COVERAGE</u> 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** 

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