

SITE SPECIFIC POLLUTION LIABILITY

APPLICATION REQUIREMENTS

- 1. Environmental Impairment Liability application complete all questions in full. (If the insured has already completed another similar site specific pollution application it is usually possible to prepare an indication using it).
- 2. Rent schedule for any residential risks.
- 3. A full copy of any environmental reports, such as Phase I Environmental Site assessments or transaction screens. If no environmental reports have been performed please state so in writing.
- 4. Information on mold risk reduction and/or operations & maintenance programs for mold, asbestos and lead, if any.

WE ONLY ACCEPT APPLICATIONS SUBMITTED BY INSURANCE AGENTS/BROKERS

Incomplete submissions will be declined

ENVIRONMENTAL IMPAIRMENT LIABILITY INSURANCE APPLICATION

NOTICE: If a policy is issued, the limit of liability available to pay judgments for settlements shall be reduced by amounts incurred for legal defense. Further note that amounts incurred for legal defense shall be applied against the deductible or retention amount.

Applicant							Date	
Address								
City State		Zip Code			Telephone No.			
Company is a: Individual Partnership Corpo					oration Joint Venture Other (describe)			
1.COVERAGE REQUESTED Î New Business Î Renewal					Proposed Effective Date: Proposed Retroactive Date:			
[↑] Third Party Pollution Liability [↑] On site cleanup					LIMITS OF LIABILITY/DEDUCTIBLE Limits Requested: Deductible Requested:			
4. Other Covera	ages and Endors	sements						
5. HISTORY O	F COMPANY							
Date Establish	ed:							
Have there been any acquisitions, consolidations, dissolutions, mergers 1 Yes 1 No								
If yes, explain:								
Does the firm have: Subsidiaries A parent company Other related entities								
If yes, explain:								
Do you share er	mployees?	í Yes í No						
If yes, explain:								
6. PRIOR CA COVERAGE FORM	RRIER LIABILIT CARRIER	TY INFORMATION RECEIPTS	LIMIT OF LIAI	BILITY	DEDUCTIBLE	TYPE OF POLIC	CY RATE	PREMIUM
								_
Any policy or coverage declined, canceled or non-renewed during the prior three years? Í Yes Í No								
If yes, explain:								
	S MUST SUBM	IT THE FOLLOWING INFO	RMATION IN	ADDIT	ION TO THE APP	I ICATION:		
ALL APPLICANTS MUST SUBMIT THE FOLLOWING INFORMATION IN ADDITION TO THE APPLICATION: 1) Copies of any environmental audit or assessment reports which have been conducted within the past three years. 2) Most recent income statement and balance sheet. 3) Five years of valued loss runs, if applicable.								
7. Description - F	Please complete	the following for all location	ns you wish to	be cov	ered.			
LOCATION ACREAGE		ACREAGE	DESCRIPTION OF CURRENT OPERATIONS			LENGTH OF OPERATIONS		
a.								
b.								
C.								
d.								
e.								
f.								
g.								

8.	Describe current operations:
	
0	
9.	List all structures on the property:
10.	Provide a list of additional occupants on this property (owned or leased):
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11.	Provide site history including all past land use and the time period for each operation:
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12.	Identify any past storage or disposal practices at the site including any on site disposal:
13.	Does this property generate, handle, store or dispose of any hazardous waste or materials? Yes No
	If yes, please complete the following: a. Type of hazardous waste or
	materials:
	·
	b. Describe the on site storage practices and storage
	areas:
	c. Describe the disposal method
	used:
14.	Does this properly presently have any storage tanks?
	If yes, please complete the following:
	a. Explain the tank inventory control program:
	a. Explain the talk inventory control program.
	b. Please obtain the following information on each tank:
	AST/UST TANK NO. CONSTRUCTION MATERIAL CAPACITY AGE SECONDARY CONTAINMENT
	AST/0ST TAINK NO. CONSTRUCTION MATERIAL CAPACITY AGE SECONDARY CONTAINMENT
3	
4	
5	
6	

15. Please complete the following in reference to the prop	perty location:
a. Provide a description adjacent properties:	
North:	
South:	
East::	
Vest:	
b. Identify nearby surface water bodies including appro-	oximate distances (i.e. streams, lakes, wetlands
c. Are there any protected environments in the area or so children may frequent?: Î Yes Î No If yes, please de	ensitive receptors (parks, wildlife preserves, etc.) or school areas where escribe:
d. Identify any surface or groundwater uses in the area (di	rinking wells, etc)
e. Is public water and sewer available? ÎYes ÎNo Provide information on any mandated or voluntary monito	ring performed at considered location (i.e. groundwater monitoring wells, NPDES, CAA, etc.
16. Does your facility treat, process, separate or store any If yes, please complete the following: a. Type of waste: b. Describe the waste treatment operation:	
D. Booonso the water treatment operation.	
c. Maximum amount of waste processed per day:	
d. Maximum amount of waste stored at any one time:	
e. Are daily operating procedures in place?	ÍNo
f. Are emergency procedures in place?	ÍNo
g. Identify effluent discharge points for wastewater and sto	ormwater:
17. Do you have a landfill on site? if yes, please complete the following: a. Acreage: Active Landfill b. Type of waste collected:	Ño Closed Landfill Vacant Land
d. Is there a leachate collection system in place?	í Yes í No
Amount of leachate produced annually:	
e. Number of active groundwater monitoring wells in place	
f. Are daily operation procedures in place?	∫No
g. Are emergency procedures in place? Í Yes Í No	

18. Have you during the last five years received any violations regarding any standard into sewers, rivers, air or onto land? 19. Tyes No 19. If yes, please provide the details: 19. If yes, please provide the details:	d or law relating to the release of a substance from the location(s)
If yes, have you ever been prosecuted?	
Please describe any pollution claims which have occurred during the last five year	s, (if none, please state so)
At the time of signing this application are you aware of any circumstances which may r ÎYes ÎNo If yes, please provide details:	
FRAUD WARNING: APPLICABL Any person who knowingly and with intent to defraud any insurance of insurance or statement of claim containing any materially false inform information concerning any fact material thereto, commits a frauduler subject to a civil penalty not to exceed five thousand dollars and the statement of the state	company or other person files an application for nation, or conceals for the purpose of misleading, at insurance act, which is a crime and shall also be
WARRANTY STATE The undersigned authorized officers of the applicant declare that the authorized officer agrees that if the information supplied on the applicand the effective date of the insurance, he/she (undersigned) will imminsurer may withdraw or modify any outstanding quotations and/or authorized this application does not bind the applicant or the insurer to	statements set forth herein are true. The undersigned cation changes between the date of the application nediately notify the insurer of such changes, and the atthorization or agreement to bind the insurance.
Notice to applicants: Any person who knowingly and with intent to de application for insurance containing any false information, or conceal concerning fact material thereto, commits a fraudulent insurance act,	s for the purpose of misleading, information
(Signature)	
(Title)	
(Date)	