

Brokers, please complete the information below and include your contact information in order for a quote to be provided. Please include all coverage values required.

Short Term Rental Application - Condo

Brokerage Name: _____ Contact Details: _____
Effective Date: _____ Expiry Date: _____

General Information

Insured Name(s): _____
Mailing Address: _____ Postal Code: _____
Risk Address: _____ Postal Code: _____
Occupation(s): _____ Birthdates: _____
Phone number: _____ Email: _____

Loss History

Previous Insurer _____
Has any insurer ever cancelled, declined or refused to renew or issue coverage? No Yes If yes, explain: _____
Have there been any losses or claims (insured or uninsured) in the past 5 years? No Yes
If yes, explain claims detail (date, cause, amount paid, open/closed): _____

Coverage

Landlord's Contents	Improvements & Betterments	Rental Income	Premises Liability
\$ _____	\$ _____	\$ _____	\$ _____

Additional Coverage:

Earthquake Coverage? Yes No Earthquake Deductible Buy Down Yes No
Sewer Backup Coverage? Yes No Deductible (\$1000 standard): \$ _____ Other: _____

Risk Information

Year Built: _____ **Square Footage:** _____ **# of Stories:** _____
Fire Protection: Within 300m of a hydrant? Yes No Within 8km of a firehall? Yes No
Construction: Frame Brick Masonry Steel Fire Resistive Other: _____
Electrical: Copper Aluminum Knob & Tube AMP Service: _____ Update year: _____ Full Partial
Primary Heating type: Gas Wood Oil Electric Other: _____ Update year: _____ Full Partial
Any Wood Heat Unit? Yes No
Type of Roof: Asphalt Metal Cedar Tar & Gravel Concrete Other? _____ Age of Roof: _____
Plumbing Type: Copper PEX ABS PVC Galvanized/Cast Iron Poly B Update year: _____ Full Partial
Where is the Hot Water Tank located? Central Boiler In Unit **If In Unit, what year was Hot Water Tank replaced:** _____
Any alarms? Yes No If yes: Local Burglary Fire

Property Management Information

How many days per year is the rental available?		Is this the insureds primary residence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, how many days a year is the unit occupied by the insured?	
Is there an individual unit property manager?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, who looks after the individual property unit while rented?			
What is the maximum number of persons permitted at any given time?				What is the minimum age requirement for applicants?		
How are tenants gaining access to the property (ex: by owner, by property manager, lock key box)?						
Is this risk physically inspected after each rental?						
Are there any security measures in place to prevent theft or damage by renters?				Is there a damage deposit taken?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there any food or liquor served to guests?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	What recreational activities and equipment (hot tub, kayak/boats, etc), if any, are offered during rental periods?			
Is property advertised on-line? If yes, please provide link/website address:						

Additional Comments:

Applicant's Signature

Date