



Residential Fuel Oil Tank Questionnaire

General Information

Broker: _____ Broker Code: _____
 submitted with New Business Renewal Update Gore Policy Number: _____

Applicant / Insured Information

Name Of Applicant / Insured: _____
 Applicant / Insured's Dwelling Address: Street: 2141 Jefferson Avenue
 City: W. Vancouver Province: BC Postal Code: _____

Tank and Installation Information (Please include photo)

Tank Manufacturer: Tidy Tanks Tank age: 11 years Tank Capacity _____ gallons
 Was the tank professionally installed? Yes No Unknown 1140 litres

Does the tank have one of the following certification labels?

CSA ULC Warnock-Hersey Ltd. (Canada) Other: _____ Unlabeled or no visible label

Tank Type and Wall Construction (check all that apply):

Steel (12 gauge - 2.5 mm) Single Wall Other: _____
 Steel (14 gauge - 2.0 mm) Double Walled
 Fiberglass

Location of tank:

Aboveground outside dwelling Aboveground inside dwelling Underground

If tank is inside, is tank filled and vented outside? Yes No

Is vent pipe higher than the fill pipe? Yes No

Is there a loop in the fuel supply line? Yes No

Is there an air space around the tank (helps prevent condensation)? Yes No

Is there any evidence of damage to the tank such as rust, dents or evidence of corrosion? Yes No

Is there any evidence of leakage (past or current), fumes or odors? Yes No

Has the tank been painted for corrosion protection? Yes No

Is the fuel line, valve and tank protected from physical damage (i.e. falling ice, snow and vehicle impact)? Yes No

Tank support (base construction):

Concrete slab Wood Patio stones Concrete blocks Other _____

Is the tank fastened with a bracket for stability? Yes No

How many oil tanks on the property? 1 Are there any abandoned tanks on the property? Yes No

Is the tank filled regularly? (keeping the tank filled helps prevent condensation within the tank) Yes No

Distance to the nearest lake, river or stream? 1 kilometers

Consent and Disclosure

Where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the Insured contravenes a term of the contract or commits a fraud; or (c) the Insured wilfully makes a false statement in respect of a claim, a claim will become invalid and the Insured's right to recovery is forfeited.

The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information.

I have provided personal information in this document and otherwise and I may in the future provide further personal information. Some of this personal information may include, but is not limited to, my credit information and claims history. I authorize my broker or insurance company to collect, use and disclose any of this personal information, subject to the law and to my broker's or insurance company's policy regarding personal information, for the purposes of communicating with me, assessing my application for insurance and underwriting my policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.

Applicant's Signature _____ Date: _____

Broker's Signature _____ Date: _____