



XL INSURANCE COMPANY LIMITED

XL Insurance Company Limited
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MOLD ENDORSEMENT APPLICATION FOR CONTRACTORS

Applicant Instructions

- ✓ Answer all questions; leave no blank spaces.
- ✓ Utilize "NA" for questions which are not applicable to your operations.
- ✓ If additional space is needed, please provide separate pages as necessary
- ✓ This application must be signed and dated by a duly authorized Owner, Partner or Officer of the applicant.

APPLICANT INFORMATION:

Applicant Name:					
Mailing Address:					
City:		Province:		Postal Code :	
Principal Contact:		Title:			
Telephone:		Fax:			
Internet Address:		Email Address:			

1. DOES YOUR FIRM HAVE WRITTEN PROTOCOLS THAT ADDRESS WATER INTRUSION AND/OR MOLD?

Yes No

If yes, attach a copy for review and reference appropriate sections in questions 2-7. Please complete all questions.

2. IDENTIFY THE TRAINING PROGRAMS YOUR FIRM PROVIDES TO EMPLOYEES REGARDING WATER INTRUSION AND/OR MOLD.

3. DOES YOUR FIRM REQUIRE SUBCONTRACTORS TO CARRY MOLD COVERAGE?

Yes No

If yes, identify which trades and required limits:

4. **HOW DOES YOUR FIRM COMMUNICATE WATER INTRUSION/MOLD RESPONSIBILITIES TO SUBCONTRACTORS?**
5. **LIST THE STEPS YOUR FIRM TAKES TO PROACTIVELY PREVENT WATER INTRUSION ON PROJECTS (i.e., contract language, document review, inspections, training, subcontractor selection, materials handling, etc.). Please attach any applicable forms.**
6. **IDENTIFY THE STEPS YOUR FIRM TAKES WHEN RESPONDING TO A WATER INTRUSTION EVENT.**
7. **DESCRIBE HOW YOUR FIRM RESPONDS TO THE DISCOVERY OF MOLD:**
- a. **New Construction:**
 - b. **Renovation projects (i.e., pre-existing condition):**
8. **WHAT PERCENTAGE OF YOUR FIRM'S SERVICES ARE:**
- New Construction ____ % Renovation ____%
9. **DOES YOUR FIRM SELF-PERFORM AND/OR SUBCONTRACT THE REMEDIATION OF MOLD?**
Yes No
- If yes, what are the criteria for determining self performance versus subcontracting?**
10. **AT PROJECT TURNOVER, HOW DOES YOUR FIRM COMMUNICATE TO CLIENTS THEIR RESPONSIBILITY IN MAINTAINING THEIR BUILDING SYSTEMS?**
11. **IF YOUR FIRM HAS ANY PAST OR POTENTIAL WATER INTRUSION/MOLD CLAIMS OR INCIDENTS, PROVIDE DETAILS AND DISCUSS LESSONS LEARNED AS A RESULT.**

FRAUD WARNINGS

NOTICE TO ALL APPLICANTS: Any person who knowingly includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

THE APPLICANT REPRESENTS THAT THE ABOVE STATEMENTS AND FACTS ARE TRUE AND THAT NO MATERIAL FACTS HAVE BEEN SUPPRESSED OR MISSTATED.

COMPLETION OF THIS FORM DOES NOT BIND COVERAGE. APPLICANT'S ACCEPTANCE OF THE COMPANY'S QUOTATION IS REQUIRED PRIOR TO BINDING COVERAGE AND POLICY ISSUANCE.

ALL WRITTEN STATEMENTS AND MATERIALS FURNISHED TO THE COMPANY IN CONJUNCTION WITH THIS APPLICATION ARE HEREBY INCORPORATED BY REFERENCE INTO THIS APPLICATION AND MADE A PART HERE OF.

Applicant: _____ Title: _____

Applicant's Signature: _____ Date: _____

Agent/Broker Name: _____