



XL INSURANCE COMPANY LIMITED

XL Insurance Company Limited
100 Yonge Street
Suite 1802
Toronto, Ontario M5C 2W1

Tel: 800-327-1414
610-458-0570
Fax: 610-458-8667

www.xlenvironmental.com

FACILITIES POLLUTION APPLICATION

APPLICANT INSTRUCTIONS:

1. Answer all questions; leave no blank spaces. Sections I through III must be completed in their entirety. If you have up-to-date engineering reports (e.g., Phase I Environmental Site Assessment Report), Section IV does not have to be completed.
2. If any questions do not apply, or the answer is "no", please indicate.
3. If multiple locations, answer the questions that pertain to any of the properties and attach a property schedule that lists location, description and use.
4. Please attach the following information, if available:
 - Past five (5) years loss runs history.
 - Past two (2) years audited financial statements.
5. If Business Interruption Coverage is desired, please attach a business interruption/income worksheet for each location.
6. For Chemical Facilities, please attach the Chemical Facilities Pollution Supplemental Application.
7. For Landfills, please attach the Landfill Pollution Supplemental Application.
8. For Mold Coverage, please attach the Mold Supplemental Application.
9. For Remediation Stop Loss/Commercial Property Redevelopment, please attach the RSL/CPR Pollution Supplemental Application.



XL INSURANCE COMPANY LIMITED

XL Insurance Company Limited
100 Yonge Street
Suite 1802
Toronto, Ontario M5C 2W1

Tel: 800-327-1414
610-458-0570
Fax: 610-458-8667

www.xlenvironmental.com

FACILITIES POLLUTION APPLICATION

This Application Is For A "Claims-Made and Reported" Pollution and Remediation Legal Liability Policy

PLEASE READ IT CAREFULLY AND FILL IT OUT COMPLETELY.

SECTION I – GENERAL INFORMATION

1. **APPLICANT NAME:** _____
Address: _____
Contact: _____ Title: _____
Telephone: _____ Fax: _____
E-Mail _____
Web Site: _____ Address: _____

2. **FIRM IS:** Partnership Corporation Joint Venture Other
 Public or Private

3. **REVENUES:** Estimated (Ensuing Year): 20____ \$____ Previous Year: 20____ \$____
Attach the Company's most recent annual report, marketing brochure and past two years audited financial statements.

4. **PROPERTY (LOCATION) DESCRIPTION:**

Name	Address	Brief Description

--	--	--

SECTION II – IN-FORCE POLLUTION COVERAGE

1. CURRENT POLLUTION COVERAGE PROVIDED UNDER OTHER POLICIES

Whether full pollution coverage or sudden/accidental named peril coverage, please provide a copy of the policy and/or endorsements.

<u>Current Carrier</u>	<u>Term</u>	<u>Limits or Sublimits</u>	<u>Self-Insured Retention</u>	<u>Premium</u>

- a. Has any insurance company denied, canceled or nonrenewed pollution liability coverage?
 Yes No
 If Yes, give details:

SECTION III – RECORD, COMPLIANCE HISTORY AND FUTURE SITE PLANS

1. RECORD:

- a. Have you ever been investigated, cited and/or prosecuted for contravention or violation of any standard or law relating to any release of pollutants?
 Yes No
 If yes, give details:
- b. Have you ever had any pollution claims including, but not limited to, claims by private persons, entities government agencies or other third parties?
 Yes No
 If yes, please describe:
- c. Are you aware of any past or present contamination on-site or emanating from the site(s), or any circumstances which may reasonably be expected to give rise to a claim or generate a request for coverage under this policy?
 Yes No
 If yes, please explain:

2. COMPLIANCE HISTORY:

- a. Have you received any notices of violation, fines, penalties, complaints, or other enforcement actions regarding compliance with environmental law within the past 5 years?
 Yes No
 If yes, please explain:
- b. Are there any statutes, standards, or other local, provincial and/or federal regulations relating to the protection of the environment with which you cannot at present comply?
 Yes No
 If yes, please explain:

- c. Has there been any past, present or planned remediation, monitoring, or sampling to investigate potential contamination?
 Yes No
If yes, please provide explanation and attach copies.
- d. Have any prior environmental studies, reports, or audits been prepared for the locations listed herein?
 Yes No
If yes, attach copies and explain why they were done:

3. FUTURE SITE PLANS:

- a. Are there any future plans to sell or sublease any of the locations listed herein?
 Yes No
If yes, please explain:
- b. Are there any known plans for future development, improvement, betterment, demolition or plans for changes in site operations at the locations listed herein?
 Yes No
If yes, please explain:

SECTION IV – DETAILED PROPERTY AND PROCEDURES INFORMATION

Please attach any environmental audits or studies that have been conducted for each location listed herein. If these audits or studies are of recent vintage and answer the questions below, this Section IV does not have to be completed.

1. PROPERTY DESCRIPTION:

- a. Total acreage:
- b. Square footage under roof:
- c. What structures are currently on this property (i.e., type of building, age, construction):
- d. List the current occupants and operations at this property?
- e. How long have these operations been ongoing?
- f. Have there been any changes in operations within the past three (3) years?
 Yes No
If yes, please explain:
- g. How long has the site been controlled by the Applicant?

- h. What types of operations have been performed at the property in the past, if different than those described above, by either the Applicant or others?
- i. How long have those other operations been performed?

2. PROPERTY SETTING: (Attach Plot Plan)

- a. Provide a description of adjacent land use:

North: _____

 South: _____

 East: _____

 West: _____

- b. Are there any nearby surface water bodies (i.e. streams, lakes, wetlands)?
 Yes No
 If Yes, please explain:
- c. Are there any protected environments in the area (parks, wildlife reserves, etc.)?
 Yes no
 If Yes, please explain:
- d. Are there any surface or groundwater uses in the area (drinking wells, etc.)?
 Yes No
 If Yes, please explain:
- e. Is public water and sewer used on site?
 Yes No
 If No, identify what is used in its place:
- f. Has a private well or septic system ever been used on-site?
 Yes No
 If Yes, please explain:
- g. Is the property located within a 100-year flood plain?
 Yes No
 If Yes, have you obtained flood insurance coverage?
 Yes No
- h. Is the property located in an Earthquake Zone 1, 2, or 3 as defined by ISO or an otherwise seismically active area?
 Yes No
 If Yes, have you obtained earthquake coverage on your property insurance?
 Yes No

- i. If the property is located in an Earthquake Zone 1, 2, or 3 as defined by ISO or an otherwise seismically active area, please describe any special precautions or emergency response procedures used to protect site equipment, tankage, containment, chemical/waste storage areas, etc.

3. ON-SITE MATERIALS:

- a. Do you have any raw materials or process materials used at location (Plating agents, degreasers, cleaning solvents, etc.)?

Yes No

If Yes, Please complete the chart below:

QUANTITY OF MATERIAL			METHOD OF STORAGE	
Description	Per Year	Any One Time	Type (ie, drum, etc)	Secondary Containment

- b. Distance of raw materials/products/waste storage/processing/disposal areas to boundary of property.

At boundary < 50 feet from boundary > 50 feet from boundary

- c. Do all storage practices for raw materials or products meet all applicable local, state and/or federal requirements?

Yes No

If No, please explain:

- d. Describe the condition of past and current housekeeping at the site including handling and storage areas for raw materials and products.

Satisfactory Needs Improvement Unsatisfactory

- e. Have you ever been cited for housekeeping issues or improper handling and/or storage of raw materials, products or wastes?

Yes No

If Yes, please explain:

- f. Are there any materials or products which you have ceased to handle within the past 5 years?

Yes No

If Yes, please identify:

4. TANK STORAGE:

- a. Does this property have any aboveground or underground storage tanks?

Yes No

If Yes, please complete the chart below. If No, skip to question #5.

<u>AST or UST</u>	<u>Capacity (gal.)</u>	<u>Contents</u>	<u>Age (yrs.)</u>	<u>Construction Material</u>	<u>Base Material</u>	<u>Secondary Containment</u>		<u>Tightness Test Anniversary Date</u>
						<u>Type</u>	<u>Volume</u>	
EXAMPLE: AST	5,000	Gasoline	7	Steel	Clay	Concrete	110%	7/4/03

b. Explain any tank inventory control and/or testing methods used (Attach latest tank test results):

c. Are all underground storage tanks in compliance with applicable standards for leak detection, overflow protection, and corrosion protection?

Yes No

If No, indicate which tanks are not in compliance:

d. Distance of the tanks to the boundary of the property:

At boundary < 50 feet from boundary > 50 feet from boundary

e. Are you aware of any tanks previously existing at the site which have been removed or closed in place?

Yes No

If yes, were they closed in accordance with applicable local, provincial and federal regulations?

Yes No

5. FACILITY WASTE GENERATION, AIR EMISSIONS, AND WASTEWATER DISCHARGES

a. Does this property generate, handle, store or dispose of any hazardous waste or materials?

Yes No

If yes, please complete the chart below.

<u>Description of Waste</u>	<u>Amount Per Year</u>	<u>At Any Time</u>	<u>Method of Storage</u>		<u>Disposal Method or Site</u>
			<u>Container Type</u>	<u>Secondary Containment</u>	
Example: Waste Solvent	500 gals.	100 gal.	55-gal. drum	Segregated area with 110% volume	Off-site. ABC Waste Company.

b. Is the property a permitted treatment, storage, or disposal Facility?

Yes No

c. Description of other waste treatment and/or storage and/or handling process/procedures:

d. Identify any past storage or disposal practices at the site.

Lagoons Landfill Landfarming

Pits Ponds Other _____

- e. Identify effluent discharge points for wastewater and stormwater (Attach discharge monitoring results):

Discharge Id	Location	Discharge Point
Example: 001	Along river	Raging river

- f. Identify types of air emissions (i.e. toxic gases, vapors, dust, etc.).

Air Emissions	Volume/Yr.	Collection/Treatment

- g. Do you have any groundwater monitoring activities at the location(s)?
 Yes No
 If Yes, Attach monitoring results for the past year and a map showing well locations.
- h. Do you have Quality Control/Assurance Procedures for inspecting incoming materials and/or waste?
 Yes No
 If Yes, please attach.

6. FIRE DETECTION/SUPPRESSION SYSTEMS AND PROCEDURES:

- a. Provide detail of fire detection/suppression systems.
- b. Are your employees trained in fire/spill response and use of personal protective equipment?
 Yes No
- c. Responding fire company is?
 Paid Volunteer
- d. Does the responding fire company make regular planned visits to the location and are they familiar with site emergency response procedures?
 Yes No
 If yes, indicate frequency and date of last visit:.
- e. Has the fire company performed "mock" drills at the property?
 Yes No
 If yes, indicate frequency and date of last mock drill:
- f. Is there a plan with the fire department to control run-off of, and contain, fire suppression water?
 Yes No
 If yes, please explain plan:

- g. What is the distance to the nearest fire hydrant if the facility does not have a sprinkler system?
_____ feet.
- h. Has the fire company been made aware of hazardous and incompatible materials used on-site?
 Yes No

7. VISITOR CONTROLS/SAFETY:

- a. Is a procedure in place for controlling visitors while on-site and ensuring their supervision?
 Yes No
If yes, please explain:

- b. Are visitors informed or trained on exposures, safety, evacuation routes and off-limit areas?
 Yes No

8. SITE SECURITY

- a. Provide a detailed description of site security controls (e.g., ID checks, access controls, guards, perimeter fencing, security cameras, etc.)

- b. Are employee background checks performed on new employees?
 Yes No

- c. Are employee background checks performed on existing employees?
 Yes No

- d. Describe security controls and supervision of loading and unloading activities at the following areas:

Trucks: _____
 Railcar: _____
 Ship/Barge: _____
 Aircraft: _____

- e. Has the facility developed a facility terrorism prevention and response plan?
 Yes No
If yes, please explain and attach a copy:

9. CATASTROPHIC RELEASE/RISK MITIGATION PLANS

- a. Has the facility developed a program to prevent catastrophic release (e.g., risk management plan, process safety management plan, etc.)?
 Yes No
If yes, please attach a copy:

- b. Has the facility developed the following approved plans?
PPC and/or SPCC Plan: Yes No
Corporate Safety and Health Plan: Yes No

- c. Does the facility have other emergency response plans or procedures in place?
 Yes No

If yes, please explain:

- d. Are employees trained on these emergency response plans?
 Yes No

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 HEREOF.

Applicant: _____ Title: _____

Applicant's Signature: _____ Date: _____

Agent/Broker Name: _____