

154 Prince William St. PO Box 1500 Saint John NB, E2L 4K3 Canada

## **Boiler Application**

Insured:				
Mailing Address:				
Business (eligible occupancies onl	v):			
Contact Name:	Title:		Phone No.:	
Effective Date of Coverage:	<u>.</u>	·		
	Location #1	Location #2	Location #3	
1. Address of location				
Heating (if Building Owner)	Steam	Steam	Steam	
	Hot Water	Hot Water	Hot Water	
	Other:	Other:	Other:	
2. Air conditioning	HP:	HP:	HP:	
	Tons:	Tons:	Tons:	
Do you have a Maintenance Contract?	Yes No	Yes No	Yes No	
3. Other Pressure Vessels (describe)	Yes No	Yes No	Yes No	
If yes, are they over 24" in diameter?	Yes No	Yes No	Yes No	
4. Building Value				
5. Contents Values				
i) Computer Hardware				
ii) All other electronic equipment (telephone, fax, copier, etc.)				
iii) Furniture and fixtures (excluding inventory)				
6. Total Rating Value (4 plus 5)				
7. Data Limit				
8. Deductible Amount				
BUSINESS INTERRUPTION VALUES				
	Location #1	Location #2	Location #3	
9. Annual Value				
CONSEQUENTIAL LOSS				
10. # of cold rooms/cabinets?				
Maximum amount stored in each				
GENERAL INFORMATION				
11. Previous Carrier: Loss History:				
12. Loss Payable (attach a list, if insufficient space provided)				
Broker				
Signed:		Date:		