**APPLICANT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of applicant: |  | | | | |
|  |  | | | | |
| Mailing address: |  | | | | |
|  | *Civic number, street* |  |  |  |  |
|  | *City* |  | *Prov.* |  | *Postal code* |

**SUPPLEMENTAL QUESTIONS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Number of year(s) in business: |  | | |  | | Number of year(s) of experience: | | | | |  | | |
| Experience of the applicant in an agricultural environment: | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | |
| **Activity(ies) of the applicant, type(s) of building/agricultural environment(s):** | | | | | | | | | | | | | |
| **Activity, type of building/agricultural env.** | |  | **Breakdown** | |  | | | **Projected annual revenue:** |  | **Annual revenue achieved:** | | | |
|  | |  | % | |  | | | $ |  | $ | | | |
|  | |  | % | |  | | | $ |  | $ | | | |
|  | |  | % | |  | | | $ |  | $ | | | |
|  | |  | % | |  | | | $ |  | $ | | | |
| **Does the applicant meet the requirements of the Quebec Construction Code, Chapter V, Electricity, on installations in agricultural** | | | | | | | | | | | | | |
| **building (wiring permitted, prohibited concealed wiring except metal sheath, protection against rodents)** | | | | | | | | | | | | | Yes  No |
| **Has the applicant ever installed temporary heating units such as “construction heaters”?** | | | | | | | | | | | | Yes  No | |
| If **YES**, are they all installed according to the requirements of the Code and provided with appropriate connection sockets, not connected | | | | | | | | | | | | | |
| directly to the electrical panels? | | | | | | | | | | | | Yes  No | |
| For locations with high humidity, does the applicant install the outlets for these heaters on non-combustible bases away from | | | | | | | | | | | | | |
| a combustible surface? | | | | | | | | | | | | Yes  No | |
| **Is the applicant installing an emergency generator?** | | | | | | | | | | | | Yes  No | |
| If **YES**, does the applicant handle maintenance contracts for the generator? | | | | | | | | | | | | Yes  No | |

**ADDITIONAL INFORMATION**

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**STATEMENT**

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| THE APPLICANT CERTIFIES THAT THE ABOVE STATEMENTS AND FACTS ARE TRUE AND THAT NO INFORMATION HAS BEEN SUPPRESSED OR MISSTATED. | | |
|  |  |  |
| *Signature of applicant*  If signed in the name of a company, indicate the position occupied: |  | *MM/DD/YY* |
| **The application must be signed by an officer, a director of the applicant Named Insured.** | | |
|  |  |  |

To send your quote request or to contact our team, write us at: [mtl.cgl@tottengroup.com](mailto:tot.cgl@tottengroup.com) .  
Our team will be happy to see if we can help you with your risk!