

**OIL TANK QUESTIONNAIRE
RENEWAL BUSINESS**

Insured's Name: _____ Policy number: _____

Risk Address: _____

Section 1 is to be completed even if OBT inspection report has been requested/received Any "yes" response indicates risk is not eligible for renewal without further underwriting action.

1. Has a qualified, Oil Burner Technician, Fuel Oil Supplier or Loss Prevention Officer deemed an immediate hazard? Yes No

Name of Manufacturer: _____ Location of tank: Inside Outside

2. Year tank was manufactured: _____

3. Tank type:

Steel (12 gauge-2.5mm) Steel (14 gauge-2mm) Fibreglass Single wall steel Single wall fibreglass
Double-wall steel Double-wall plastic & steel Double-bottomed

Other:

Secondary Containment (110% containment) Secondary Containment (other)

4. Is tank a 14 gauge single wall steel construction? Yes No

5. Is tank located on any floor other than the lowest level? Yes No

Distances: To walls: _____ To fuel fired appliances: _____ To sump pump or drains: _____

6. Is tank located in or under the ground? Yes No

7. Does the supply line pass through any concrete floor? Yes No

8. Is fuel delivered by anyone other than a qualified Fuel Oil Supplier? Yes No

9. Is tank installed on anything other than a concrete slab or block? Yes No

10. Are there any current/ongoing spills involving your property? Yes No

Details: _____

11. Have there been any previous oil spills involving your property? Yes No

Details: _____

If possible, attach a copy of a "Record of Site Condition" document.

12. If the oil tank is located outside of the main dwelling, is protection from ice and vehicle impact missing? Yes No

13. Is the tank filter located outside the dwelling? Yes No

14. Was the oil tank installed by anyone other than a qualified Oil Burner Technician? Yes No

Name of Installer: _____

15. Is any of the following older than the oil tank? Yes No

Supply Lines: age:_____ Vents: age:_____ Fill Pipes: age: _____ Filter Body: age:_____

16. Are there unused fuel oil tanks on the property? Yes No

17. Do you have an annual maintenance service contract with an Oil Burner Technician? Yes No

Name: _____ (Please attach a copy of the contract or proof of maintenance.)

Section 2: Complete if OBT inspection not received. If any response is "No", order OBT Inspection or refer to Strategies for Managing Exposures.

- 18. Is the tank labelled CSA/ULC certified? Yes No
- 19. Is tank secured in accordance with applicable code compliance? Yes No
- 20. Is tank new and not previously used? Yes No
- 21. Is there a loop in the line at the tank and appliance? Yes No
- 22. Are fill and vent pipes constructed from black pipe? Yes No
- 23. Are filters ULC approved? Yes No
- 24. Have flared fittings been used on all feed lines, filters and fittings? Yes No
- 25. Is tank/floor surrounding tank stain free? Yes No
- 26. Is tank/equipment rust free? Yes No

Signature of applicant/insured: _____ Date: _____

Coverage bound? Yes No

Signature of Agent/Broker: _____ Date: _____

OBT Inspection received? Yes No

Supplemental Questionnaire fully completed and signed? Yes No

Photos received? Yes No

*Any "yes" response with the exception of question #17 meets a declination rule and coverage cannot be bound without underwriting approval.

*Any "no" response for questions #18-26 requires Underwriter to either order Oil Burner Technician Inspection (preferred) or refer to 'Strategies for Managing Exposures' in the Underwriting guidelines. All work must be completed by a qualified technician.

Signature of Underwriter approval: _____ Date: _____

Underwriting Action taken: _____