

[Commercial Lines]
SWIMMING LIABILITY SUPPLEMENT



SWIMMING LIABILITY SUPPLEMENT

PART 1

GENERAL INFORMATION

this Applicant for Insurance or any renewal, extension or variation thereof. All provisions contained in the various forms issued under this contract shall be deemed to be contained in the present Application of Insurance. The policy may be deemed to be void and claims may be denied where: 1) An applicant for a contract: a) Gives false or erroneous information to the prejudice of the insurer, or b) Knowingly misrepresents or fails to disclose in the Application any fact required to be stated therein; or 2) The Insured contravenes a term of the Contract or commits a fraud; or 3) The Insured willfully makes a false statement in respect of a claim under the contract.	Broker:	Tel:
LOC #: Legal Address: Postal Code: Description of the Swimming Facility: Are your swimming facilities open to the general public? Are life rings or buoys provided and within easy access? Are life rings or buoys provided and within easy access? Are life Guard on duty at ALL times the facility is open for use? Are facility rules clearly posted? Are trained employees available for emergencies?	Broker Contact:	mail:
Description of the Swimming Facility: Description of the Swimming Facility:	Name of Insured (Full Legal Name):	
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AND I APPLY FOR A CONTRACT OF INSURANCE BASED UPON THE TRUTH OF THESE STATEMENTS.		
I AM IN AGREEMENT THAT THIS DECLARATION SHALL HEREBY FORM PART OF THE INSURANCE CONTRACT.		
Applicant's Signature: Position:	Applicant's Signature:	Position:

Please print name:

Date: