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## STORAGE TANK SUPPLEMENT TO ENVIRONMENTAL IMPAIRMENT LIABILITY INSURANCE

(Gradual or Sudden and Accidental for fixed site premises exposures)

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### CLAIMS MADE COVERAGE

Name of Applicant: \_\_\_\_\_

Supplemental to Environmental Application dated: \_\_\_\_\_

#### 1. STORAGE TANK & LOCATION SCHEDULE:

(copy and attach separate sheet for each location containing tanks to be covered)

Location No.: \_\_\_\_\_

Occupied as: \_\_\_\_\_

Do you:  Own  Operate  Lease this facility? If not owned, please name the owner:

\_\_\_\_\_

#### 2. DURING THE PAST FIVE YEARS HAS THE APPLICANT HAD ANY REPORTABLE RELEASES OR SPILLS OF REGULATED SUBSTANCES, HAZARDOUS WASTE OR ANY OTHER POLLUTANTS, AS DEFINED BY APPLICABLE ENVIRONMENTAL STATUTES OR REGULATIONS?

Yes  No If Yes, were the following involved:

Corrective Action	<input type="checkbox"/> Yes <input type="checkbox"/> No	Third Party Claims	<input type="checkbox"/> Yes <input type="checkbox"/> No
Remediation Complete	<input type="checkbox"/> Yes <input type="checkbox"/> No	Claim Closed	<input type="checkbox"/> Yes <input type="checkbox"/> No
No Further Actions	<input type="checkbox"/> Yes <input type="checkbox"/> No	Claim Open	<input type="checkbox"/> Yes <input type="checkbox"/> No
Remediation On-Going	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Provide Details: \_\_\_\_\_

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3. HAVE ANY REPAIRS OR UPGRADES (INCLUDING RELINING/COATINGS) BEEN PERFORMED FOR ANY TANK AT ANY LOCATION WITHIN THE PAST 10 YEARS?

Yes  No If Yes, please explain: \_\_\_\_\_

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4. WERE ALL TANKS NEW AT INSTALLATION?

Yes  No  Unknown

5. WERE ANY TANKS REMOVED OR CLOSED WITHOUT OBTAINING APPROPRIATE RECORD OF SITE CONDITIONS, CLEAN CLOSURE OR NO FURTHER ACTION DOCUMENTATION?

Yes  No  Unknown

6. IS THERE A SPILL PREVENTION AND COUNTER CONTROL PLAN WITH REGARD TO ABOVEGROUND STORAGE TANKS IF ANY EXISTS?

Yes  No  Not Applicable

7. IF YES, HAVE ANY INSPECTIONS OR MAINTENANCE PROCEDURES REQUIRED BY THE PLAN NOT BEEN PERFORMED?

Yes  No  Unknown If Yes, please explain: \_\_\_\_\_

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8. DOES THE APPLICANT USE AN OUTSIDE CONTRACTOR OR FIRM FOR COMPLIANCE MANAGEMENT SERVICES? THIS INCLUDES, BUT IS NOT LIMITED TO, EQUIPMENT INSPECTION AND MONITORING, PROPER FEDERAL, PROVINCIAL AND LOCAL REGULATORY PAPERWORK COMPLETION, AND FILING, POOLING GAUGES AND MONTHLY MONITORING REPORTS FOR YOU?

Yes  No

9. DOES THE APPLICANT USE A REMOTE MONITORING SYSTEM, WITH AN OUTSIDE VENDOR WHO RECEIVES AN ALARM WHEN A RELEASE OCCURS AND IS RESPONSIBLE FOR NOTIFYING THE APPROPRIATE PARTIES?

Yes  No

10. DO ANY PLANS EXIST TO REMOVE OR REPLACE ANY TANKS WITHIN THE NEXT YEAR?

Yes  No If Yes, please explain: \_\_\_\_\_

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11. DOES THE APPLICANT CURRENTLY HAVE POLLUTION LIABILITY INSURANCE COVERAGE FOR THE TANKS APPLIED FOR ON THIS APPLICATION?

Yes  No

If Yes, please list below the name of the carrier, expiring premium, expiring deductible, and limits of liability; or attach a copy of your current policy declarations page.

Name of Insurer: \_\_\_\_\_ Expiring Premium: \$ \_\_\_\_\_

Retroactive Date: \_\_\_\_\_ Limits of Liability: \$ \_\_\_\_\_/\$ \_\_\_\_\_

Deductible: \_\_\_\_\_

12. LIMITS DESIRED: \_\_\_\_\_

SELF INSURED RETENTION DESIRED: \_\_\_\_\_

For SIR above \$25,000, please include your most current financial statement.

13. POLICY TERM DESIRED:

From \_\_\_\_\_ To: \_\_\_\_\_

14. AT THE TIME OF SIGNING OF THIS APPLICATION, DO ALL TANK SYSTEMS COMPLY, AT A MINIMUM, WITH THE TSSA OR EQUIVALENT PROVINCIAL REQUIREMENTS REGARDING AGE, CONSTRUCTION, OVERFILL/SPILL PROTECTION AND LEAK DETECTION FOR TANKS, PIPING, AND DISPENSING SYSTEMS?

Yes  No If No, please explain: \_\_\_\_\_

15. AT THE TIME OF THE SIGNING OF THIS APPLICATION, IS THE APPLICANT AWARE OF ANY FACTS OR CIRCUMSTANCES WHICH MAY REASONABLY BE EXPECTED TO RESULT IN A CLAIM OR CLAIMS BEING ASSERTED AGAINST THE APPLICANT FOR ENVIRONMENTAL CLEANUP OR RESPONSE, OR FOR BODILY INJURY OR PROPERTY DAMAGE ARISING FROM THE RELEASE OF POLLUTANTS INTO THE ENVIRONMENT?

Yes  No If yes, please provide explanation: \_\_\_\_\_

THIS SUPPLEMENT TOGETHER WITH THE ENVIRONMENTAL IMPAIRMENT LIABILITY INSURANCE APPLICATION TO WHICH IT IS ATTACHED, CONSTITUTE THE APPLICANTS REPRESENTATIONS AND WILL FORM THE BASIS OF ANY POLICY THAT MAY BE ISSUED.

Signature of Applicant: \_\_\_\_\_ Dated: \_\_\_\_\_

Print Name and Title: \_\_\_\_\_



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**TANK SUPPLEMENT** (Please complete separate supplement for each scheduled location)

	1	2	3	4	5
Tank #					
Underground (UST)/Aboveground (AST)					
Install Date Year					
Capacity (Gallons)					
Contents					
Tank Construction Double walled (DW)/ Single walled (SW)					
Tank Construction Material					
Overfill/Spill Protection					
Tank Leak Detection					
AST Diking & Base Construction					
Piping Construction Double walled (DW)/ Single walled (SW)					
Piping Construction Material					
Piping Leak Detection					

CONTENTS	TANK CONSTRUCTION/ MATERIAL	OVERFILL/SPILL PROTECTION	AST DIKING & BASE CONSTRUCTION
<b>UG.</b> Unleaded Gasoline	<b>S.</b> Steel	<b>BC.</b> Ball Check Valve	<b>K.</b> Concrete, Synthetic Material clays
<b>EG.</b> Gasohol	<b>F.</b> Fiberglass	<b>SC.</b> Spill Containment Bucket	<b>Z.</b> Dirt/Earth
<b>D.</b> Diesel	<b>FRP.</b> FRP Clad Steel	<b>SO.</b> Flow Shut-off	<b>NO.</b> None
<b>K.</b> Kerosene	<b>C.</b> Concrete	<b>TT.</b> Tight Fill	
<b>WO.</b> Waste Oil/ Used Oil	<b>PE.</b> Polyethylene	<b>AL.</b> Level Gauges, High Level Alarms	<b>PIPING CONSTRUCTION/MATERIAL</b>
<b>FO.</b> Fuel Oil	<b>CPSA.</b> Cathodic Protection Sacrificial Anode	<b>OT.</b> Other TSSA/EPA/Other Approved Protection Method	<b>S.</b> Steel
<b>G.</b> Generic Gasoline	<b>CPIC.</b> Cathodic Protection Impressed Current	<b>NO.</b> None	<b>FBR.</b> Fiberglass
<b>AM.</b> Ammonia compound	<b>DWDM.</b> Double Walled (DW) Dual Material	<b>TANK LEAK DETECTION</b>	<b>SM.</b> Approved Synthetic Material
<b>CL.</b> Chlorine compound	<b>DWSL.</b> (DW) Synthetic Liner in Tank Construction	<b>GMW.</b> Groundwater Monitoring Wells	<b>EPC.</b> External Protective Coating impressed current
<b>HAZ.</b> Haz. Substance (CERCLA)	<b>DW.</b> (DW) Pipeless UST with Secondary Containment	<b>IM.</b> Interstitial Monitoring	<b>PIPING LEAK DETECTION</b>
<b>V.</b> Grades 5&6 bunker 'C' oils		<b>VIS.</b> Visual Inspections of	<b>G.</b> Electronic Line Leak Detector with Flow Shutoff
<b>W.</b> Petroleum-base additive		<b>OTHER.</b> Other TSSA/EPA/Other Approved	<b>J.</b> Interstitial Monitoring - Piping Filter
<b>X.</b> Misc. petroleum-base		<b>INTS.</b> Interstitial Space- Double Walled Tank	<b>EM.</b> External Monitoring
<b>Z.</b> Other, Identify		<b>MAN.</b> Manual Tank Gauging – UST	<b>H.</b> Mechanical Line Leak Detector
		<b>STAT.</b> Statistical Inventory Reconciliation (SIR)(USTs)	<b>K.</b> Interstitial Monitoring of double wall piping
		<b>AUTOTG.</b> Automatic Tank Gauging System (USTs)	<b>V.</b> Suction Pump Check Valve
		<b>IMAST.</b> Interstitial Monitoring of AST Tank Bottom	<b>NO.</b> None
		<b>TT.</b> Annual Tightness Test with Inventory (USTs)	