

Intact Insurance Company

**Directors and Officers Liability Insurance
and Organization Reimbursement
Insurance for Non-Profit Organizations
or Association Liability Insurance
Application**



Supplementary Questionnaire for Subsidiaries of Non-Profit Organization which are operating for Profit.

20. Name of Organization/Association:

Address:

(Number)

(Street)

(City)

(Prov.)

(Postal Code)

21. a) Is this Organization incorporated? Yes No With share capital? Yes No

b) What is Organization's legal structure? Corporation Association Foundation Trust Other

If Other, give details:

If incorporated, under which statute(s): Business Corporations Act Corporations Act Other

If Other, state which statute(s):

c) What is the purpose of the Organization? (*Provide copies of information booklet if available*)

d) When organized?

22. Does the Organization have any operations outside Canada? Yes No

If yes, give details:

23. Does the Organization have any affiliated or subsidiary company operating for a profit? Yes No

If yes, give details:

24. Stock Ownership:

a) Total number of common stock shareholders:

b) Total number of common shares owned by its Directors and Officers (direct and beneficial):

c) In event any shareholder owns ten percent (10%) or more of the common shares directly or beneficially, designate name and percentage of holdings:

d) Exchanges on which shares of the Organization or its Subsidiaries are traded:

25. Number of: Directors: Officers: (*Schedule attached*)

Professionals, state number and profession:

Clerical Employees: Volunteers: Other, state number and description:

26. Do the answers to Questions 10, 12, 13 and 14 include details for the Organization?: Yes No

If no, give full details:

27. Are any of the Directors, Officers, or any person(s) proposed for insurance indebted to the Organization? Yes No

If yes, give details:

28. Has any similar insurance on behalf of the Organization been declined, cancelled or renewal thereof refused? Yes No

If yes, give details:

29. Directors and Officers Liability Insurance or Association Liability Insurance carried during the past three years:

Insurer	Limit of Liability	Deductible	Period	Premium

30. Limit of Liability: \$

It is agreed that any claim arising from any "Wrongful Act" which is known to any Director, Officer or any person(s) proposed for insurance prior to the issuance of the policy shall be excluded from coverage.

The undersigned authorized Officer of the Organization on behalf of the Directors and Officers and the Organization declares that to the best of his/her knowledge and belief the statements set forth herein are true.

Signature: _____

Date: _____

Capacity: Chairman of the Board President

One copy of the following is attached and made part of this proposal:

1. Last Annual Report or Audited Financial Statement
2. Charter or Bylaws

Agent/Broker
: _____

THIS APPLICATION WILL BE CONSIDERED AS FORMING PART OF THE POLICY.

