



Main Office
397 Eagleview Blvd.
Suite 100
Exton, PA 19341

Supplemental Application for Premises Environmental Liability Insurance

Named Insured: _____

NOTICE: This supplemental application forms a part of the Application for Environmental Insurance.

Instructions:

- Answer all questions completely. If any questions do not apply, please state N/A in the space provided.
- Please provide supporting information on a separate sheet and reference the applicable question number. Any supporting information is considered part of this application and is subject to the same terms and conditions.

Required Attachments:

- Additional Storage Tank Schedule (**check here if not applicable**).
- Please provide copies of your last three (3) years of Pollution Liability, Property and General Liability loss history.
- Please provide copies of available property inspection reports.
- Please provide a copy of your Water Intrusion Management Plan/Mold Operation and Maintenance Plan.

Supplemental Information

1. Has any proposed location had an indoor air quality and/or mold problem that cost more than \$20,000 to resolve?

Location	Street Address/City/State Zip Code	Standard Industrial Classification Code (SIC)	Years at Location	Facility Size: (acres and square footage under roof)	Owned or Leased
1.					
2.					
3.					

2. Please provide a description of the operations performed at each proposed location:

1. _____
2. _____
3. _____

3. Please describe the historical use(s) of each proposed location:

1. _____
2. _____
3. _____

4. Please describe other companies that also operate out of or lease space at each proposed location:

1. _____
2. _____
3. _____

Supplemental Information Continued

5. Please describe the land use surrounding each proposed location (including sensitive habitats, geographic features, industries, waterways, residences, schools, etc.):

- 1. _____
- 2. _____
- 3. _____

6. Please provide the following approximate distances

Distance from the proposed location to the nearest surface water (streams, lakes, wetlands, etc.):

- 1. _____ 2. _____ 3. _____

Distance from the proposed location to the nearest residence:

- 1. _____ 2. _____ 3. _____

7. Has any proposed location ever been used or is currently being used for on-site disposal of waste material (i.e. lagoons, incineration, surface impoundment, septic system, leach fields, etc.)? Yes No

If yes, please describe: _____

8. Describe off-site waste disposal practices. Include the type of material; annual quantity; name and address of the receiving facility; and any known compliance problems at such receiving facility:

9. Please provide the following information for each location. Attach an additional Storage Tank Schedule if needed.

Above Ground Storage Tanks N/A

Location	Age	Capacity (gallons)	Contents	Construction Material	Containment Construction (Earthen, Concrete, Steel, None, if Other please specify)	Date Tank Last Tested

Underground Storage Tanks N/A

Location	Age	Capacity (gallons)	Contents	Construction Material (including piping)	Leak Detection (please specify the method utilized)	Date Tank Last Tested

Supplemental Information *Continued*

Yes No

Are all of the underground storage tanks listed in the application materials compliant with the 1998 US EPA standards for leak detection, corrosion protection and overflow protection?

Effluent/Emission treatment and discharge N/A

Location	Discharge Composition	Daily Amount	Treatment Process	What is Material Discharged to?	For How Many Years?
1.					
2.					
3.					

10. Please answer the following questions regarding fire/spill safety.

Provide details of the fire detection/suppression systems at each proposed location:

Are your employees trained in fire/spill response?

Has the fire company been made aware of hazardous and incompatible materials used on-site?

11. Are you aware of any current or past contamination at any proposed location?

If yes, please explain: _____

12. Are you aware of any prior, on-going or planned remediation projects at any proposed location?

If yes, please explain: _____

13. Describe any groundwater monitoring at proposed locations. Indicate number of wells and provide a copy of the four (4) most recent groundwater monitoring reports: _____

14. Have you received any complaints, notices of violation, fines, penalties, or other enforcement actions regarding pollution conditions and/or compliance with environmental law within the past five (5) years?

If yes, please explain: _____

15. Are there any standards, statutes, or other regulations relating to the environment with which a location does not comply?

If yes, please explain: _____

16. Are there any plans to sell or sublease any proposed location(s)?

If yes, please explain: _____

Supplemental Information *Continued*

	Yes	No
17. Are there any plans for development, improvement, demolition or other changes in site use/ operations at any proposed location(s)? If yes, please explain: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>
18. Has any proposed location had an indoor air quality and/or mold problem that cost more than \$20,000 to resolve? If yes, please describe: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>
19. Are there any visible signs of mold growth in any structure at a proposed location? If yes, please describe and approximate the square footage impacted: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>
20. Have any proposed locations had construction defects or maintenance problems that resulted in indoor air quality and/or mold problems? If yes, please describe: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>
21. Has a complaint ever been made by a third party relating to indoor air quality and/or mold problems at a proposed location? If yes, please describe: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>
22. Do you have a formal process to document and track indoor air quality and/or mold complaints?	<input type="checkbox"/>	<input type="checkbox"/>
23. Have indoor air quality and/or mold inspections been performed at the proposed locations? If yes, were any indoor air quality or mold issues identified? If yes, please describe and attach the related report(s): _____ _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
24. Are any proposed locations in flood plains or otherwise subject to periodic flooding or the ponding of water? If yes, please describe and explain what steps have been taken to prevent future damage: _____ _____	<input type="checkbox"/>	<input type="checkbox"/>
25. Does your Company provide any off-site contracting services? If yes, please explain in detail and provide the revenue associated with such services: _____ _____ If you answered yes above, have such services ever caused a pollution incident? If yes, please describe in detail: _____ _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

It is acknowledged by the applicant that this Supplemental Application is considered part of the Application for Environmental Insurance and is subject to the same terms and conditions.

Applicant's Initials _____ **Date** _____