

Creechurch EmPloyrite EMPLOYMENT PRACTICES LIABILITY INSURANCE APPLICATION

THIS IS AN APPLICATION FORM FOR A CLAIMS FIRST MADE AND REPORTED POLICY.

FOR PURPOSES OF THE *INSURANCE COMPANIES ACT (CANADA)*, THIS DOCUMENT WAS ISSUED IN THE COURSE OF LLOYD'S UNDERWRITERS' INSURANCE BUSINESS IN CANADA.

A) Name of Company:

B) Mailing Address:

Web Site Address:

C) Describe nature of business:

☐ Sole Proprietor ☐ Corporation ☐ Partnership ☐ Joint Venture
☐ Franchise ☐ Other (Please specify)

Number of Employees: Full-time Cdn US

Part-time or Seasonal Cdn US

[Part-time = less than 25 hours per week

Seasonal = less than 6 months annually]

D) Any past Employment Practices Liability claims? ☐ YES ☐ NO

E) Are there any known situations that could give rise to a claim? ☐ YES ☐ NO

For example, but not by way of limitation, we consider it reasonable for you to foresee that a claim may be brought against you if a current or former employee or an applicant for employment has expressed dissatisfaction with the employment relationship or the employment application process by:

- i) Making a formal complaint to a supervisory employee of discrimination, harassment or unfair employment practices;
- ii) Threatening to hire an attorney;
- iii) Asking for a severance package in excess of what is being offered;
- iv) Complaining of discrimination, harassment or unfair treatment and threatening to do something about it; or
- v) Frequent complaining of discrimination, harassment or unfair treatment.

F) Does the Company currently carry Directors and Officers insurance? ☐ YES ☐ NO

If YES, please provide the following information:

Insurer	Term	Limit	Does the policy include EPL?
		\$	<input type="checkbox"/> YES <input type="checkbox"/> NO

We strongly suggest that you carefully consider purchasing this coverage. Failing to do so could expose your business to a serious financial loss.

NOTICE CONCERNING PERSONAL INFORMATION

By purchasing insurance from Creechurch International Underwriters Ltd. (Creechurch), a customer provides Creechurch with his or her consent to the collection, use and disclosure of personal information, including that previously collected, for the following purposes:

- | | |
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| <ul style="list-style-type: none">• the communication with underwriters;• the underwriting of policies;• the evaluation of claims; | <ul style="list-style-type: none">• the detection and prevention of fraud;• the analysis of business results;• purposes required or authorized by law. |
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For the purposes identified above, personal information may be disclosed to Creechurch's related or affiliated companies and service providers.

Further information about Creechurch's personal information protection policy may be obtained by contacting their privacy officer at 416-601-2155.

WARRANTY STATEMENT

The Applicant on behalf of the Proposed Insureds further warrants that if the information supplied on this application changes between the date of this application and the inception date of the Policy, it will immediately notify us of such change in writing. Signing this application does not bind Underwriters to offer nor the Applicant to accept insurance, but it is agreed that this application shall be the basis of the insurance and will be attached and made a part of the Policy should a policy be issued.

QUEBEC RESIDENTS ONLY:

I hereby confirm my request that the present document and any other document and correspondence pertaining to the present insurance be in the English language.

SIGNED:
(Authorized Representative)

DATED:

NAME (Please Print):

TITLE/POSITION: