



Federation of Ontario Cottagers' Associations



7145 West Credit Avenue, Bldg #3 Ste. 201
Mississauga, Ontario L5N 6J7
Tel (905) 567-6222 Fax: (905) 567-6226
E-Mail: FOCA@atrens-counsel.com

COMMERCIAL GENERAL LIABILITY (CGL) APPLICATION

TO BE COMPLETED BY LAND ASSOCIATIONS

Please print clearly

SECTION A

NAME OF ASSOCIATION _____

CONTACT NAME: _____
TEL: _____
FAX: _____
E-MAIL _____

MAILING ADDRESS: _____
_____ POSTAL CODE: _____

Is your Association Incorporated _____ Yes _____ No

Location: _____
(Township/Town/Village) _____

FOCA Membership _____ Yes _____ No

Current Number of Members _____

REQUIRED LIMIT OF LIABILITY

	CGL		D&O
_____	\$3,000,000.	_____	\$3,000,000.
_____	\$5,000,000.	_____	\$5,000,000.

NOTE:

If D & O Coverage required: Complete Application for Non-Profit Directors & Officers Liability

SECTION D - PRIOR INSURANCE COMPANY

Name of Insurance Company _____

Policy Number _____ Policy Term _____ to _____

COVERAGE LIMITS

EXPIRING POLICY PREMIUM

CGL Liability _____

Crime _____

Directors & Officers _____

SECTION E - LOSS HISTORY

Date of Loss

Amount Paid

Type of Loss

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

DECLARATION

The undersigned declares that all statements made in the Application and the information contained in documents submitted with it are true. Signing of this document does not bind the Application to complete the insurance, but it is agreed that the Application shall be the basis of the contract, should a policy be issued.

SIGNED, SEALED AND DELIVERED this _____ day of _____

Corporation

Duly Appointed

