

## LIABILITY INSURANCE APPLICATION

Name of Applicant:  

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Address:  

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City:  

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Prov/Terr:  

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Postal Code:  

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Telephone:  

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Email:  

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\*Please advise BMS if your contact details change in order to continue to receive information pertaining to your insurance.

Note: This coverage is only available to members who are domiciled in Canada. Please confirm you understand and agree to the eligibility requirements. ☐

Are you renewing this insurance policy?

☐ Yes ☐ No

If you are renewing your insurance policy after its expiry date and outside of the renewal period, please confirm that you understand the effective date of this policy will be set to the current date of application. ☐

### Applicant Details

In order to be eligible for this insurance policy, you must be a member of one of the designated provincial or territorial social worker associations or be an affiliate member of CASW. If you are not a member, this policy is null and void.

**Note for practitioners in Alberta:** Registration with ACSW no longer provides access to the CASW insurance program.

Please confirm you understand the eligibility requirements. ☐

Name of Provincial or Territorial social worker association:  

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Membership number:  

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Do you or your business provide professional services outside the scope of social work, for which you ☐ Yes ☐ No require insurance coverage? [Note, this policy will only provide coverage for services that fall within your scope of practice as a social worker. Other professional services, such as work as a registered psychologist, are not covered by this insurance.]

If yes, please provide details.

  

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Has any application for Professional Liability, Commercial General Liability and/or Property insurance ever been denied, cancelled or not renewed? ☐ Yes ☐ No

If yes, please provide details.

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Has any Professional Liability or Commercial General Liability claim or lawsuit been made against you/your business, or is any such claim now pending against you/your business and/or have you made a Property claim? ☐ Yes ☐ No

If yes, please provide details.

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Are you aware of any facts, circumstances, or situations, which may reasonably give rise to a claim against you/your business? ☐ Yes ☐ No

If yes, please provide details.

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When delivering services and in order for your insurance coverage to apply, you must abide by the professional regulations in your jurisdiction (for instance, the province in which you reside) and in the jurisdiction where your patient is located. The CASW Professional Liability insurance policy applies to services delivered worldwide and responds to claims brought forward and defended in Canada.

Please confirm you understand the coverage terms. ☐

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### Animal/Equine Assisted Therapy

Would you like to add on Animal/Equine Assisted Therapy coverage? ☐ Yes ☐ No

If yes, does your Equine Assisted Therapy include mounting? ☐ Yes ☐ No

Please select an option below. Additional details will be required. A BMS broker will contact you following the completion of your application.

Animal/Equine Assisted Therapy ☐ **\$100** annual premium

Equine Assisted Therapy **including mounting work** ☐ **\$500** annual premium

## Business Details

**Do not** complete this section for or on behalf of someone else's business or a business where you are employed.

Do you deliver professional services under your own business name/entity? ☐ Yes ☐ No

If yes, please provide your primary entity / business name (please list all operating names related to the entity):

Location Address (if different from above):

City:

Province/Territory:

Postal Code:

Do you operate more than one entity for which you require coverage? ☐ Yes ☐ No

If yes, please provide details.

## Professional Liability Insurance / Commercial General Liability Insurance / Property Coverage

### Professional Liability: Claims-made policy

Professional Liability Insurance (PLI) protects you against liability or allegations of liability for injury or damages that have resulted from a negligent act, error, omission, or malpractice that has arisen out of your professional capacity as a social worker. Your policy also responds if a complaint is made against you to your regulatory body (College).

#### **Coverage Details:**

Professional Liability	To limit selected
Disciplinary Defence Coverage	\$200,000 per claim/aggregate
Criminal Defence Cost Reimbursement	\$150,000 per claim/aggregate
Abuse & Molestation	\$1,000,000 per claim/aggregate (\$1,000 deductible)
Coverage Territory	Worldwide for claims brought forward and defended in Canada

### Commercial General Liability: Occurrence-based policy

Commercial General Liability (CGL) protects you against claims arising from injury or property damage that you may cause to another person as a result of your operations and/or premises. For example, a client may slip and fall on a wet floor on your premises or you may accidentally cause property damage during a home visit.

#### **Coverage Details:**

Commercial General Liability	\$5,000,000 per occurrence/aggregate
Bodily Injury and Property Damage	\$5,000,000 per occurrence/aggregate
Products – Completed Operations	\$5,000,000 per occurrence/aggregate
Personal Injury and Advertising Injury	\$5,000,000 per occurrence/aggregate
Tenant's Legal Liability	\$500,000 per occurrence/aggregate
Medical Payments	\$50,000 each person

#### **Deductibles:**

Property Damage	\$500
Tenant's Legal Liability	\$500

## Contents/Crime/Business Interruption Coverage

**Contents** includes items usual to an office, including desks, chairs, filing cabinets and computers, as well as any stock and improvements and betterments.

**Crime** coverage protects against financial loss due to dishonesty, fraud, or theft of money, securities or other property owned by the office/clinic.

**Business Interruption** insures against loss of income resulting from direct physical loss or direct physical damage to the premises by an insured peril (e.g. fire).

### **Coverage Details:**

Contents	\$50,000 (higher limits available)
Business Interruption	\$1,000,000
Crime	\$10,000

### **Deductibles:**

All Risks	\$500
Sewer Backup	\$2,500
Flood	\$25,000
Earthquake	3% or \$100,000
Crime	\$500

	Limit	Annual Cost
<b>Plan I</b>	Individual Professional Liability \$5,000,000 per claim / \$5,000,000 annual aggregate	<input type="checkbox"/> \$132
	Commercial General Liability \$5,000,000 per occurrence / \$5,000,000 annual aggregate	
<b>Plan II</b>	Individual Professional Liability \$5,000,000 per claim / \$5,000,000 annual aggregate	<input type="checkbox"/> \$776
	Commercial General Liability \$5,000,000 per occurrence / \$5,000,000 annual aggregate	
	Contents - \$50,000 (higher limits available - coverage is subject to a 90% co-insurance clause)	
	Crime - \$10,000	
	Business Interruption – \$1,000,000	

**If Plan II is selected**, please answer the following:

Do you anticipate undergoing any renovations in your office space within the policy term?

☐ Yes ☐ No

### Increased Individual Professional Liability Limit

Limit	Annual Cost
\$7,000,000 per claim / \$8,000,000 aggregate	\$64

Do you want to increase your Individual Professional Liability limit to \$7,000,000 per claim / \$8,000,000 aggregate? ☐ Yes ☐ No

### Higher Contents Limit – For Plan II Only\*

If Plan II is selected, do you require a higher contents limit? ☐ Yes ☐ No  
If yes, please select an option below.

\* To account for inflation, insurers require that you increase your contents limit by a minimum of 5%.

Limit	Annual Cost
\$100,000	<input type="checkbox"/> \$191
\$150,000	<input type="checkbox"/> \$290
\$200,000	<input type="checkbox"/> \$381

If Plan II is selected, do you require contents/crime/business interruption at an additional location? ☐ Yes ☐ No

### Equipment Breakdown/Boiler and Machinery

This addition is only available if Plan II is selected, and provides coverage for sudden and accidental failure of equipment resulting in physical damage which requires the repair or replacement of the equipment or a part of the equipment.

Insured equipment includes:

- any boiler, fired or unfired pressure vessel normally subject to vacuum or internal pressure other than static pressure of contents, any piping connected thereto or any
- other piping and its accessory equipment, any heat exchanger that forms part of forced air heating equipment,
- any mechanical or electrical equipment used for the generation, transmission or utilization of mechanical or electrical power,
- any electronic equipment or fibre optic cable, used for research, diagnosis, treatment, communication, word processing, data processing, duplicating, monitoring or scanning.

Do you require Equipment Breakdown Coverage? ☐ Yes ☐ No  
If yes, please complete the fields below.

**\$500 deductible; 24 hour waiting period.**

Limit	Annual Cost
\$50,000	<input type="checkbox"/> \$114
\$100,000	<input type="checkbox"/> \$138
\$150,000	<input type="checkbox"/> \$221
\$200,000	<input type="checkbox"/> \$252

#### Building / Condominium Unit Coverage

Do you own the building or condominium unit where your business is located for which you require insurance? Please note we do not provide coverage for residential properties. ☐ Yes ☐ No

#### Co-Insurance (Applicable for Plan II)

Coinurance is a penalty imposed on the insured by the insurance carrier for under reporting/declaring/insuring the value of tangible property or business income. The penalty is based on a percentage stated within the policy and the amount under reported. In this policy you have a co-insurance requirement of 90%. As an example:

If the value of the contents you are insuring is \$150,000 and the policy contains a 90% co-insurance clause; this means you should purchase at least \$135,000 in coverage. If you were only purchasing \$100,000 coverage and had a loss of \$100,000, the insurance company would pay based on the following formula:

Amount of insurance in place / Amount of insurance that should have been in place x Amount of the loss = Amount paid, less any deductible

For example, \$100,000 / (\$150,000 x 90%) x \$100,000 = \$74,074 payment for loss (less deductible)

BMS recommends that your insurable values be reviewed and appropriately appraised to ensure you are purchasing the correct content and property limits.

I understand the co-insurance clause and have selected an adequate contents limit. ☐

#### Additional Insured(s)

Only complete this section if you are contractually required to add an Additional Insured to your Commercial General Liability insurance policy.

Adding an Additional Insured provides limited liability insurance coverage to the third party Additional Insured but only as it relates to General Liability resulting from your operations / occupancy. Note that any Additional Insured is required to carry their own Commercial General Liability insurance.

I understand and agree to the terms detailed above. ☐

Name:

Address:

City:

Province/Territory:

Postal Code:

### Loss payee(s)

Only complete this section if you are contractually required to add a Loss Payee to your Property insurance policy.

A Loss Payee is a third party entity who is entitled to all or part of the claim settlement for damaged property in which they have an insurable interest. (e.g. a Leasing company). Your contents limit must encompass the value of the leased property.

I understand and agree to the terms detailed above. ☐

Name:

Address:

City:

Province/Territory:

Postal Code:

### Legal Entity Professional Liability

Recommended for businesses with other professionals working for or on behalf of your business and/or billing under your business name. Also recommended for individuals providing services under their business name.

Extends your Individual Professional Liability to the business entity. Please note that coverage should be purchased by one individual on behalf of the business owners, and /or business entity. Shared limit with Individual Professional Liability.

Would you like to purchase Legal Entity Professional Liability Insurance?

☐ Yes ☐ No

If yes, please complete the fields below.

### Social Work Only Business

Employees / Contractors	Limit	Annual Cost
Yourself Only	Shared with Professional Liability	<input type="checkbox"/> \$166
1-3	Shared with Professional Liability	<input type="checkbox"/> \$253
4-6	Shared with Professional Liability	<input type="checkbox"/> \$427
7-9	Shared with Professional Liability	<input type="checkbox"/> \$625
Over 9	Shared with Professional Liability	<input type="checkbox"/> Referral

## Multi-discipline Business

Employees / Contractors	Limit	Annual Cost
1-3	Shared with Professional Liability	<input type="checkbox"/> \$365
4-6	Shared with Professional Liability	<input type="checkbox"/> \$540
7-9	Shared with Professional Liability	<input type="checkbox"/> \$725
Over 9	Shared with Professional Liability	<input type="checkbox"/> Referral

Each professional providing services for or on behalf of your business must carry their own individual Professional Liability insurance.

Do you understand and confirm this? ☐

If Multi-discipline business is selected, please review the list of disciplines below:

- Sleep Consultants
- Child and Development Consultants
- Psychologists
- Occupational Therapists
- Counsellors/ Therapists
- Psychotherapists
- Nurse Practitioners
- Teacher/Early Childhood Educators
- Life Coach/Health Coach
- Peer Support Workers

Do you contract or employ staff outside of the list noted above?

☐ Yes ☐ No

If yes, please include the discipline of the staff you employ or contract below:

## Cyber Security & Privacy Liability

Cyber liability continues to be an ever-evolving area of risk. You have access to a comprehensive Cyber Security and Privacy Liability policy to protect against claims arising out of theft, loss, or unauthorized disclosure of a third party's personally identifiable information.

Coverage is designed to manage the risk of holding increasingly large quantities of personally identifiable data of clients, employees, and others, and to mitigate the reputational damage resulting from a data security breach.

### Breach Response

Legal, Forensic & Public Relations/Crisis Management \$250,000  
Notified Individuals 5,000 (Individual), 100,000 (Business)

### Policy Aggregate Limit

\$1,000,000

### First Party Loss

Business Interruption \$25,000  
Cyber Extortion Loss \$100,000  
Data Recovery Costs \$100,000



**Liability**

Data & Network Liability	\$1,000,000
Regulatory Defense & Penalties	\$250,000
Payment Card Liabilities & Costs	\$1,000,000
Media Liability	\$1,000,000

**eCrime\***

Fraudulent Instruction*	Available for additional premium
Funds Transfer Fraud	Available for additional premium
Telecommunications Fraud	\$100,000

**Criminal Reward Cover**

Criminal Reward Cover	\$25,000
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**Deductibles**

Each Incident	\$1,000
Notified Individuals	100

Would you like to purchase Cyber Security & Privacy Liability coverage?  
If Yes, please complete the fields below.

☐ Yes ☐ No

Individual Practitioners	<input type="checkbox"/> \$121 annual premium
Business & Employees – \$0 to \$500,000 gross revenue	<input type="checkbox"/> \$675 annual premium
Business & Employees – \$500,001 to \$1,000,000 gross revenue	<input type="checkbox"/> \$1,023 annual premium
Business & Employees – \$1,000,001 to \$1,500,000 gross revenue	<input type="checkbox"/> \$1,284 annual premium
Business & Employees – \$1,500,001 to \$2,000,000 gross revenue	<input type="checkbox"/> \$1,578 annual premium
Business & Employees – \$2,000,001 to \$2,500,000 gross revenue	<input type="checkbox"/> \$1,776 annual premium
Business & Employees – \$2,500,001 to \$3,000,000 gross revenue	<input type="checkbox"/> \$1,873 annual premium
Business & Employees - \$3,000,001 to 3,500,000 gross revenue	<input type="checkbox"/> \$2,017 annual premium
Business & Employees - \$3,500,001 to \$4,000,000 gross revenue	<input type="checkbox"/> \$2,159 annual premium
Business & Employees - \$4,000,001 to \$4,500,000 gross revenue	<input type="checkbox"/> \$2,298 annual premium
Business & Employees - \$4,500,001 to \$5,000,000 gross revenue	<input type="checkbox"/> \$2,434 annual premium
Business & Employees – Above \$5,000,001 gross revenue	<input type="checkbox"/> Referral

Has any Cyber claim or lawsuit been made against you/your business, or is any such claim now pending against you/your business? Please only select yes if not already reported to BMS/the insurer.

☐ Yes ☐ No

If yes, please provide details.

Are you aware of any facts, circumstances or situations, which may reasonably give rise to a claim against you/your business? Please only select yes if not already reported to BMS/the insurer. If yes, please provide details. ☐ Yes ☐ No

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Have you/your business ever had a cyber security / privacy breach and/or network security incident in the past or has such a claim been made against you/your business? If yes, please provide details. ☐ Yes ☐ No

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#### Statement of Facts including condition precedent requirements

The following items are important risk mitigation strategies and are required by the insurer for coverage to be secured. Please confirm the following is accurate:

**IT IS A CONDITION PRECEDENT FOR COVERAGE UNDER THIS POLICY THAT ALL THE BELOW ITEMS ARE SATISFIED. IF ANY OF THE BELOW STATEMENTS ARE NOT MET THEN NO COVERAGE SHALL BE PROVIDED UNDER THIS POLICY FOR ANY DAMAGES, CLAIMS EXPENSES, PENALTIES, PRIVACY BREACH RESPONSE SERVICES, PCI FINES EXPENSES AND COSTS, CYBER EXTORTION LOSS, DATA PROTECTION LOSS, BUSINESS INTERRUPTION LOSS.**

Please confirm the following is accurate:

**I/my business implements loss control measures such as: Antivirus software, a firewall, and/or regular software patch installations.**

**I/my business regularly back-up critical data to a separate location that would be unaffected by an issue with your live environment.**

**I/my business use multi-factor authentication (MFA) for cloud based services (Such as cloud based email account access) and for all remote access to your network; or if No, I/my business use Jane, Clinicmaster, owl practice or Practiceperfect.**

**For those systems which have an on-premises network only: I/my business only allow(s) remote access into our environment with a virtual private network (VPN). Note: This does not apply if your systems are entirely cloud based.**

I confirm the above statements are true and accurate. ☐

I also confirm the following:

**I/my business take and/or provide cyber security awareness training at least once annually, including anti-phishing. For businesses, this includes training for all individuals who have access to your organization's network or confidential/personal data. Resources can be found at [www.getcybersafe.gc.ca](http://www.getcybersafe.gc.ca).**

I confirm the above statement is true and accurate. ☐

#### **\*Additional Coverage Available**

If your business transfers funds, BMS recommends you consider adding Fraudulent Instruction/Funds Transfer Fraud coverage.

**Fraudulent Instruction** means the transfer, payment or delivery of Money or Securities by an Insured as a result of fraudulent written, electronic, telegraphic, cable, teletype or telephone instructions provided by a third party, that is intended to mislead an Insured through the misrepresentation of a material fact which is relied upon in good faith by such Insured.

**Funds Transfer Fraud** means the loss of Money or Securities contained in a Transfer Account at a Financial Institution resulting from fraudulent written, electronic, telegraphic, cable, teletype or telephone instructions by a third party issued to a Financial Institution directing such institution to transfer, pay or deliver Money or Securities from any account maintained by the Insured Organization at such institution, without the Insured Organization's knowledge or consent.

\$25,000 limit for **\$230 / year**

\$100,000 limit starting from **\$335 / year**

Would you like BMS to contact you to provide an application for Fraudulent instruction/Funds Transfer Fraud coverage? ☐ Yes ☐ No

### Employment Practices Liability (not available for QC members)

Do you employ administrative and/or professional staff? Does your business engage independent contractors, volunteers, or students? This insurance is designed for business owners to protect against allegations of employment practice violation, including wrongful termination, discrimination, workplace harassment, and other employment related allegations.

Recommended for business owners with employees, contractors, volunteers or students.

Do you require Employment Practices Liability? ☐ Yes ☐ No  
If yes, please complete the fields below.

	Limit	Annual Premium
Option 1	\$100,000	<input type="checkbox"/> \$262
Option 2	\$250,000	<input type="checkbox"/> \$362
Option 3	\$500,000	<input type="checkbox"/> \$383
Option 4	\$1,000,000	<input type="checkbox"/> \$499

Total number of employed staff (professionals):

Total number of administrative staff (including students working under supervision):

Total number of contracted staff (professionals):

Has any application for similar insurance ever been denied, cancelled or not renewed? ☐ Yes ☐ No  
If yes, please provide details.

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Are you aware of any facts, circumstances or situations, which may reasonably give rise to a claim against you/your business? Please only select yes if not already reported to BMS/the insurer? ☐ Yes ☐ No  
If yes, please provide details.

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Has there been or are there now pending, any claims against the business, or any past, present directors, officers or employees of the business:

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Involving any employment law? ☐ Yes ☐ No  
If yes, please provide details.

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Involving non-employment related discrimination or sexual harassment? ☐ Yes ☐ No  
If yes, please provide details.

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During the past 12 months, has the business experienced any change in controlling ownership of the business? ☐ Yes ☐ No  
If yes, please provide details.

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Do you require Employment Practices Liability coverage for an additional corporation? ☐ Yes ☐ No

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## Legal Services Package

Members can access a comprehensive Legal Services Package, which includes:

### Unlimited Legal Helpline

Unlimited access to the Legal Helpline. Helpline Lawyers provide general legal information and assistance for any legal question. Please note: the lawyer will not advise on coverage, make a claim decision, or review documents.

### Legal Document Centre

Unlimited access to an online library of legal documents, all of which have been drafted by lawyers, and are in the form of guided, customizable templates. Examples of templates include wills and power of attorney documents, employment contracts, service agreements, and more. Documents are based on Canadian laws and legal best practices. They can be downloaded and saved securely for future reference or reuse.

### Legal Document Review

Access to lawyers to review a simple legal document and provide you with an annotated copy of the document with their notes. This will assist you in understanding the general impacts that the document may have for you.

### Simple Legal Letter Drafting

Access to lawyers who will draft a simple legal letter for you to send. This service is intended to assist you with drafting simple documents, such as a demand letter, a complaint letter, a travel consent letter for a child, a resignation letter, or a warning letter to an employee.

### Emotional Support Assistance

Access to Emotional Support Assistance through which you can confidentially speak with a professional counsellor about any work or personal issues which may be affecting you.

### Identity Theft Protection Assistance

Identity theft experts will provide you with general assistance and prevention tips about identity theft and how to protect yourself. If you believe you have been the victim of identity theft, this service can also provide you with direct assistance by an Identity Restoration Expert to help restore your identity.

### HR Assistance

Access to HR Assistance where you can speak to a Human Resources professional, who can provide you with information regarding HR issues that are impacting your business.

### Annual Cost \$35

Would you like to purchase the Legal Services Package?

☐ Yes

☐ No

**Note, if you are purchasing Legal Expense insurance (below), the Legal Services Package is automatically included in the Personal and Business Legal Solutions.**

## Legal Expense Insurance Solutions

Personal and/or business-related legal matters can arise at any time and can be costly.

**Personal Legal Solutions** provides:

- Legal Services Package (as detailed above except HR Assistance)
- Insurance to coverage the legal costs for resolving a range of disputes, including:
  - Pursuit or defence of Contract Disputes
  - Pursuit or defence of Tenancy Disputes (90 day waiting period applies from the inception of the first policy held)
  - Total Loss Valuation Disputes (motor vehicle)
  - Defence of Driver's Licence Protection
  - Pursuit for Bodily Injury
  - Pursuit for Property Protection
  - Defence for Tax Protection

Each claim/aggregate limit	Premium
\$25,000/\$125,000	<input type="checkbox"/> \$80
\$50,000/\$250,000	<input type="checkbox"/> \$93

Would you like to purchase Personal Legal Solutions?

☐ Yes

☐ No

If yes, please answer the questions below.

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In the last 3 years, have you, your spouse, or any adult children living in your home:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Pursued a consumer contract dispute?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pursued a dispute with a neighbour or had to take action following a legal nuisance or trespass on your land?                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pursued legal action against a negligent third party following an injury to yourself?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Pursued legal action against a medical practitioner following an incident of clinical negligence which caused you an injury? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Been audited by the CRA?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Been interviewed by the police or arrested in connection with an alleged criminal offence?                                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Been sued for alleged discrimination?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Been the victim of identity theft?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If yes, please provide details.

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**Business Legal Solutions** provides:

- Legal Services Package (as detailed above except Identity Theft Protection)
- Insurance to cover for legal costs for resolving a range of disputes, including:
  - Employee's Extra Protection
  - Auto Legal Defence
  - Defence of Contract Disputes & Debt Recovery (90 day waiting period applies from the inception of the first policy held)
  - Defence for Statutory Licence Appeals
  - Pursuit for Property Protection
  - Pursuit for Bodily Injury
  - Tax Protection

**\$50,000 per claim / \$250,000 aggregate**

Estimated Revenue for the next 12 months	Premium
\$0 to \$150,000	<input type="checkbox"/> \$145
\$150,001 to \$250,000	<input type="checkbox"/> \$230
\$250,001 to \$500,000	<input type="checkbox"/> \$375
\$500,001 to \$1,000,000	<input type="checkbox"/> \$480
\$1,000,001 to \$2,000,000	<input type="checkbox"/> \$845
\$2,000,000 +	<input type="checkbox"/> Referral Required

Would you like to purchase Business Legal Solutions?  
If yes, please answer the questions below.

☐ Yes ☐ No

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Total number of employees (full time & part time):

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In the last 3 years has your business, you or any employee, director or partner of the business been:

Subject to a tax audit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Involved in a dispute regarding compliance with GST, Income Tax, PST or HST or payroll tax deductions?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Involved in any dispute regarding any damage, trespass or nuisance in relation to property that you are responsible for?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Prosecuted in a criminal court (excluding vehicle-related offences)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Subject to a civil action alleging theft or breach of privacy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The recipient of a notice to alter, suspend, revoke or refusal to renew any statutory licence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Involved in any contractual dispute?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If yes, please provide details.

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Have you pursued an undisputed debt in the last 12 months, after you had exhausted your normal aged receivable procedures? ☐ Yes ☐ No

If yes, please provide details.

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## 24 Hour Accident Coverage (not available for QC members)

Although we don't like to think about it, accidents can happen. If the accident is serious enough to limit your ability to work, you may be faced with financial stressors in addition to physical ones. This coverage is designed to provide you and your loved ones with financial assistance in the event of an accident that results in injury or death.

### 24 Hour Accident Insurance provides a lump sum benefit where:

- A loss or death occurs due to an Accident, and
- Where, as the result of accidental injury, the disablement results in a permanent total disability.

### The policy also provides coverage for:

- Repatriation costs, and
- Rehabilitation (training) costs should you require special training in order to be qualified to engage in a different occupation following an insured accident.

**Coverage Overview**

Accidental Death and Dismemberment (AD&D)	\$25,000
Permanent Total Disability (PTD)	\$25,000
Repatriation	\$5,000
Rehabilitation	\$5,000
Fracture Benefit	\$2,000

**Annual Cost: \$35**

Would you like to purchase the 24 Hour Accident Insurance? ☐ Yes ☐ No

In order to purchase the 24 Hour Accident Insurance coverage you must be under the age of seventy (70).

Please confirm your Date of Birth (MM/DD/YYYY):

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Would you like to increase the principal sum for AD&D and PTD to \$50,000 for an additional \$25? ☐ Yes ☐ No

**Psychology Today Offer!**

CASW Members who purchase insurance through the BMS Insurance Program can now access a free first-time 6 month listing in Psychology Today's Therapy Directory – worth \$210.

Would you like a broker to contact you with more information? ☐ Yes ☐ No

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**Declarations and Warranty**

I declare that during the last five years no insurer has cancelled, declined, or refused to issue me/us any form of liability insurance and that this application discloses the hazards known to exist at the date of this application. I declare that the statements herein are in every respect true and correct and hereby apply for a contract of insurance to be based upon the truth of the said statements.

Submitting this form does not bind the Applicant or company to complete the insurance but is agreed that this form shall be the basis of the contract should a policy be issued.

The insurance premium is fully retained and not refundable.

Signed by:

Position:

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Date:

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## Fee Disclosure

Line of Coverage	Premium	Commission (included within premium)	Fee
Professional Liability / Commercial General Liability / Property	Per application	25%	Nil
Legal Entity Professional Liability	Per application	25%	Nil
Cyber Security & Privacy Liability	Per application	25%	Nil
Employment Practices Liability	Per application	25%	Nil
Legal Services Package	Per application	N/A	\$13
Personal Legal Expense	Per application	20%	Nil
Business Legal Expense	Per application	20%	Nil
24 Hour Accident Insurance	Per application	15%	\$6

## Payment Information

### The following provinces are subject to provincial sales tax:

Ontario residents add 8% sales tax

Québec residents add 9% sales tax

Manitoba residents add 7% sales tax

Newfoundland residents add 15% sales tax

Saskatchewan residents add 6% sales tax

All other provinces are exempt.

GST is not applicable to insurance premiums.

### Legal Service Package Tax:

Note: Cost includes broker fee and is subject to the applicable HST Tax:

New Brunswick, Newfoundland, Nova Scotia and Prince Edward Island add 15%

Ontario add 13%

Alberta, British Columbia, Manitoba, Northwest Territories, Nunavut, Quebec, Saskatchewan and Yukon add 5%

Sub-total	\$
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Service Fee	\$10.00
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Tax	\$
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Total Enclosed	\$
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\*Please note: The Service Fee does not apply if you ONLY purchase the PLI/CGL/Property Package.

All cheques payable to BMS Canada Risk Services Ltd, or complete credit card authorization below.

Authorization for Credit Card Charge

VISA, AMEX or M/C Account No:	Expiry Date:	CVV:
Cardholder Name:	Signature:	

**BMS Canada Risk Services Ltd. (BMS)**  
825 Exhibition Way, Suite 209  
Ottawa, ON K1S 5J3

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Fax: 613-701-4234  
Email: [casw.insurance@bmsgroup.com](mailto:casw.insurance@bmsgroup.com)