PISTAGNESI·DOYON
AGENCE DE SOUSCRIPTION

Professional Insurance Underwriting
and Marketing Through Service Integrity and Stability

CENTRAL STATION MONITORING SERVICES SUPPLEMENTAL APPLICATION

TELEPHONE, ANSWERING AND PAGING SERVICE SUPPLEMENTARY APPLICATION

This Supplemental Application must be submitted along with
Our main Security Service Liability Insurance Application

1. Applicant Name

2. **Description of Operations** — **Estimated Annual Income**

☐ Alarm Systems – Monitoring
Residential $
Commercial $

☐ Fire Protection Systems – Monitoring
Residential $
Commercial $

☐ Environmental Security Systems – Monitoring
Sewage Treatment Plans $
Nuclear / Power Plants $
Other: $

☐ Telephone Answering Services $
☐ 911 Emergency Services $
☐ Paging Services $
☐ Secretarial $
☐ Other (Please describe)
$

Total Estimated Annual Income $

3. Please indicate the percentage of your business for the following clients
Furriers/Jewelers % Financial Institutions % Retail %
Major Public % Environmental % Storage %
Residential % Other % (Please describe)

4. Please list your five (5) largest clients and describe the operations offered by these clients

5. **Questionnaire :**

a) Year your company was established?
b) What is your area of operation?
c) Are certificates issued? ☐ Yes ☐ No

If yes what types of certificates?

d) Is your station U.L.C. listed? ☐Yes ☐No

Designation Levels

e) Are security audits conducted? ☐Yes ☐No

If yes, by whom? Frequency

f) Do you have written procedures for your operations? ☐Yes ☐No

g) Is there a formal training program for operators ☐Yes ☐No

h) What is the minimum training or experience required for operators?

i) Is your monitoring system computerized? ☐Yes ☐No

j) Is access to monitoring facilities strictly controlled? ☐Yes ☐No

k) Minimum number of staff in attendance?

l) Is back up power available? ☐Yes ☐No

Describe procedures for system/power failure

Do you have an uninterrupted power source (UPS) ☐Yes ☐No

How is the UPS maintained and by whom?

How many hours does the back-up system work for the event of power failure?

Please provide details:

Indicate the experience/qualification of the person providing maintenance to the UPS

m) Are Runner/Guards dispatched? ☐Yes ☐No

Own employees? Other – describe

n) Are customer's keys kept? ☐Yes ☐No

If yes, how are they stored and identified?

o) Who is installing & servicing alarm systems?

☐Outside Contractors ☐Own Contractors

Describe

*****If you are installing and/or servicing alarm systems please complete the installers Supplemental Application**

p) Do you require outside installers to provide evidence of liability insurance?

☐Yes ☐No

Describe

q) Are there minimum requirements installers must meet to be acceptable?

☐Yes ☐No

Describe

r) Do contracts attempt to limit liability (attach copy)

☐Yes ☐No

This supplement attaches to and is part of the application that shall form the basis of the contract, should a policy be issued.

Completion of this application does not bind the company to provide the insurance. It is agreed, however, that this application shall form the basis of the contract, should the policy be issued by the Company.

I declare that to the best of my knowledge and belief, all of the foregoing statements are true and that these statements are the declarations upon which an insurance policy may be issued.

Date: Signature:

Title:

SUBMITTED BY:

EMAIL: