



### APPLICATION FOR OFF-ROAD VEHICLE INSURANCE

Certificate Number:		Phone # (Res):		Phone # (Bus):										
Name of Insured(s):			Email:											
Address:		Town:	Prov:	Postal:										
List of Operators Names		Occupation	Driver's License #		Date of Birth YYYY-MM-DD									
Principal:														
Others:														
List All at Fault Accidents – Claims in past 5 years – Date/Amount/Description														
List All vehicle driving violations/convictions/suspensions in past 5 years														
Have there been any alcohol and drug violations/convictions/suspensions in the past 15 years?														
Has any insurance policy ever been cancelled/declined/refused to renew														
If so provide reason Previous Insurer Loss Payable (If any)														
Years of snowmobile experience		Years of ATV Experience		Pleasure use only?										
Details of unit(s) to be insured:														
	<b>Make, Model &amp; CC</b>	<b>Year</b>	<b>Sled or ATV</b>	<b>Plate</b>	<b>Snopass</b>	<b>Serial Number</b>	<b>Brand New?</b>	<b>Value</b>						
1														
2														
3														
Premium Rating: (with \$1000 deductible)														
	Base Rate		Deductible:		Safe Rider Discount (-10%) for snopass Claims & Violation Free		50+ Discount (-15%)		Safety Course (-5%) FOR SLELY		RC +\$100 Flat		Claims Surcharge	Total
1		+	-	-	-	-	-	-	-	+	+	+		
2		+	-	-	-	-	-	-	-	+	+	+		
3		+	-	-	-	-	-	-	-	+	+	+		
													Taxes	
													<b>Total</b>	
<b>Total Sum Enclosed – (to nearest dollar)</b>														
<i>Minimum Premium \$226 for Snowmobiles &amp; \$102 for ATV's</i>														
Policy Premium is minimum and retained (unless insured unit is sold)														

**I hereby understand that the information provided herein is correct to the best of my knowledge and that intentionally providing false information or withholding information is a breach of insurance coverages.**

Signature of Applicant		Date:	
Signature of Broker		Date:	

**Complete and forward to BSI by email: orv@bsimb.com**