



**M.S.P.F. NO. 4 APPLICATION FOR GARAGE AUTOMOBILE POLICY  
(OWNER'S FORM)**

**SASKATCHEWAN MUTUAL INSURANCE COMPANY**

AGENT  
OR  
BROKER

NO. \_\_\_\_\_

ITEMS	APPLICATION	REPLACING CANCELLED/EXPIRED POLICY NO.		
1. FULL NAME OF THE INSURED				
BUSINESS ADDRESS (INCLUDING COUNTY OR DISTRICT)	(A) _____			
LOCATION OF OTHER PREMISES WHERE BUSINESS IS CONDUCTED (SHOW EACH BUILDING AND LOT SEPARATELY).	(B) _____			
	(C) _____			
	(D) _____			
2. POLICY PERIOD	FROM TIME <input type="checkbox"/> AM <input type="checkbox"/> PM DAY MO. YEAR TO DAY MO. YEAR 12:01 AM	ALL TIMES ARE LOCAL TIMES AT THE APPLICANT'S POSTAL ADDRESS STATED HEREIN		
3. THE AUTOMOBILES IN RESPECT OF WHICH INSURANCE IS TO BE PROVIDED ARE THOSE USED IN CONNECTION WITH THE APPLICANT'S BUSINESS OF:  (SPECIFY WHETHER AUTOMOBILE DEALER, REPAIR GARAGE, SERVICE STATION, STORAGE GARAGE OR PARKING LOT, AND DESCRIBE ALL OTHER BUSINESS, IN RESPECT OF WHICH INSURANCE IS TO BE PROVIDED, CONDUCTED BY THE APPLICANT AT THE LOCATIONS SPECIFIED IN ITEM 1 HEREOF) NOTE: THIS FORM SHOULD NOT BE USED FOR RENTAL OR LEASING EXPOSURES				
4. ESTIMATED TOTAL PAYROLL FOR POLICY PERIOD \$	NUMBER OF EMPLOYEES INCLUDING PROPRIETORS, PARTNERS AND EXECUTIVE OFFICERS AT THE EFFECTIVE DATE OF THE POLICY	FULL-TIME PART-TIME		
5. THIS APPLICATION IS MADE FOR INSURANCE AGAINST ONE OR MORE OF THE PERILS MENTIONED IN THIS ITEM, BUT ONLY FOR INSURANCE UNDER THE SECTION(S) OR SUBSECTION(S) FOR WHICH A PREMIUM IS SPECIFIED IN THIS ITEM AND NO OTHER AND UPON THE TERMS, CONDITIONS, PROVISIONS, DEFINITIONS AND EXCLUSIONS OF THE INSURER'S CORRESPONDING STANDARD POLICY FORM AND FOR THE FOLLOWING SPECIFIED LIMITS AND AMOUNTS.				
INSURING AGREEMENTS	PERILS	LIMITS AND AMOUNTS	PREMIUM	
SECTION B THIRD PARTY LIABILITY	LEGAL LIABILITY FOR BODILY INJURY TO OR DEATH OF ANY PERSON OR DAMAGE TO PROPERTY OF OTHERS NOT IN THE CARE, CUSTODY OR CONTROL OF THE APPLICANT	(EXCLUSIVE OF COSTS AND POST JUDGEMENT INTEREST) FOR LOSS OR DAMAGE RESULTING FROM BODILY INJURY TO OR THE DEATH OF ONE OR MORE PERSONS AND FOR LOSS OR DAMAGE TO PROPERTY, REGARDLESS OF THE NUMBER OF CLAIMS ARISING FROM ANY ONE ACCIDENT.	\$	
SECTION C LOSS OF OR DAMAGE TO OWNED AUTOMOBILES	1. COLLISION OR UPSET	ACTUAL CASH VALUE AT TIME OF LOSS OR DAMAGE NOT EXCEEDING THE COST TO THE INSURED	SUM PAYABLE BY INSURED IN RESPECT OF EACH SEPARATE AUTOMOBILE \$	
	THE PREMIUM UNDER SUBSECTIONS 2, 3 AND 4 SHALL BE CALCULATED ON A MONTHLY AVERAGE BASIS <input type="checkbox"/> OR CO-INSURANCE BASIS <input type="checkbox"/> OR OTHER <input type="checkbox"/>			
		LOCATION AS PER ITEM 1	SUBSECTIONS INSURED	LIMIT OF LIABILITY
	2. COMPREHENSIVE (EXCLUDING COLLISION OR UPSET AND OPEN LOT PILFERAGE)	(A)	\$	\$
	3. SPECIFIED PERILS (EXCLUDING OPEN LOT PILFERAGE)	(B)	\$	\$
4. SPECIFIED PERILS (EXCLUDING THEFT)	(C)	\$	\$	
	(D)	\$	\$	
IN RESPECT OF EACH AUTOMOBILE, THE ACTUAL CASH VALUE AT THE TIME OF LOSS OR DAMAGE NOT EXCEEDING THE ACTUAL COST TO THE INSURED AND SUBJECT TO THAT LIMIT FOR EACH AUTOMOBILE (A) THE AMOUNT OF INSURANCE STATED IN THE MONTHLY REPORT, IF ANY, OR (B) THE LIMIT OF INSURANCE STATED HEREIN TO BE APPLICABLE TO EACH SPECIFIED LOCATION FOR LOSS OR DAMAGE FROM ANY ONE OCCURRENCE AT EACH SPECIFIED LOCATION.				
SECTION E LEGAL LIABILITY FOR DAMAGE TO CUSTOMERS' AUTOMOBILES HELD IN THE CARE, CUSTODY OR CONTROL OF THE APPLICANT	1. COLLISION OR UPSET	(EXCLUSIVE OF COSTS AND POST JUDGEMENT INTEREST) ANY ONE CUSTOMER'S AUTOMOBILE	SUM PAYABLE BY INSURED IN RESPECT OF EACH SEPARATE OCCURRENCE \$	
	2. SPECIFIED PERILS (EXCLUDING OPEN LOT PILFERAGE)	LOCATION AS PER ITEM 1	MAXIMUM NUMBER OF CUSTOMER'S AUTOMOBILES	
		(A)	LIMIT OF LIABILITY (EXCLUSIVE OF COSTS AND POST JUDGEMENT INTEREST) ANY ONE OCCURRENCE.	
		(B)	\$	
		(C)	\$	
		(D)	\$	
ENDORSEMENTS			\$	
STATE NAME AND ADDRESS OF LIENHOLDER OR MORTGAGEE TO WHOM, JOINTLY WITH THE APPLICANT, LOSS, IF ANY, UNDER SECTION C IS PAYABLE AS THEIR INTERESTS MAY APPEAR		MINIMUM RETAINED PREMIUM \$	TOTAL PREMIUM \$	
6. HAS ANY INSURER CANCELLED, DECLINED OR REFUSED TO RENEW OR ISSUE ANY INSURANCE RELATED TO THE BUSINESS OF THE APPLICANT WITHIN THE THREE YEARS PRECEDING THIS APPLICATION? IF SO, STATE NAME OF INSURER.				
7. STATE PARTICULARS OF ALL ACCIDENTS, LOSSES OR CLAIMS ARISING OUT OF THE OWNERSHIP, USE OR OPERATION OF ANY AUTOMOBILE (I) BY THE APPLICANT, AND (II) IN CONNECTION WITH THE BUSINESS, WITHIN THE THREE YEARS PRECEDING THIS APPLICATION (LIST SEPARATELY IF NECESSARY).				
INJURY TO PERSONS		DAMAGE TO APPLICANT'S VEHICLES		
		(A) COLLISION	(B) OTHER	
		DAMAGE TO PROPERTY OF OTHERS		
		(A) NOT IN CARE OF APPLICANT	(B) IN CARE OF APPLICANT	
8. WHERE (A) AN APPLICANT FOR A CONTRACT, (I) GIVES FALSE PARTICULARS OF THE DESCRIBED AUTOMOBILE TO BE INSURED TO THE PREJUDICE OF THE INSURER, OR (II) KNOWINGLY MISREPRESENTS OR FAILS TO DISCLOSE IN THE APPLICATION ANY FACT REQUIRED TO BE STATED THEREIN; OR (B) THE INSURED CONTRAVENES A TERM OF THE CONTRACT OR COMMITS A FRAUD; OR (C) THE INSURED WILLFULLY MAKES A FALSE STATEMENT IN RESPECT OF A CLAIM UNDER THE CONTRACT, A CLAIM BY THE INSURED IS INVALID AND THE RIGHT OF THE INSURED TO RECOVER INDEMNITY IS FORFEITED.				
<b>Consent</b>				
1. I am applying for garage automobile insurance based on the information provided above. With respect to this application or any renewal or change to my coverage, I authorize you to collect, use and disclose information as permitted by law for the purposes necessary to assess the risk and issue or decline the insurance contract. Information collected for the purposes stated in this consent shall be limited to my driving record information, automobile insurance claims history and premium payment information unless otherwise authorized or permitted by law.				
2. I acknowledge that the Total Estimated Premium is subject to adjustment to the Insurer's manual premium for the risk.				

DAY MONTH YEAR

SIGNATURE OF APPLICANT

