intact public entities

Account Information Update
Children's Aid Societies

Please provide an update of your operations and exposures for our file. This information will be used for the next renewal term.

Legal Name of Applicant _____ Policy Number _____

Brokerage Name _____

Is Provincial Workers' Compensation Insurance carried? YES ☐ NO ☐

Information Required		Comments
Total Annual Payroll including Benefits	$	
Total Annual Operating Budget	$	
Total number of:		
Board Members		
Employees (FTE*)		
Volunteers		
Foster/Kinship Homes		
Group Homes		
Children in Care		
Investigations		
Professionals - Total number of (FTE*):		
Supervisors		
Social Workers		
Other professionals - specify type		

*FTE means Full Time Equivalent

***Professionals The following Professionals are Excluded under our policy.**

Medical, surgical, dental, x-ray or nursing services provided by a physician, nurse practitioner or dentist while acting in their professional capacity, including the furnishing of food and beverages in connection with such service. Architectural, design or engineering services. Computer programming or re-programming, consulting, advisory or related services. Claim, investigation or adjusting of claims services.

Describe any changes or anticipated changes in your operation or exposures

_____

_____

The undersigned authorized signatory of the organization declares that, to the best of his/her knowledge, the statements set forth herein are true.

Note: At any time if circumstances change in that they may materially alter the risk or exposure, please contact your underwriter with complete details.

Applicant Name _____ **Title/Position** _____

Applicant Signature _____ **Date** _____

Broker Name _____

Broker Signature _____

Intact Public Entities
278 Pinebush Road, Suite 200, Cambridge, Ontario, N1T 1Z6
Toll free 1 800 265 4000 intactpublicentities.ca