

## Residential Fuel Oil Tank Questionnaire

Broker: Martin Merry & Reid Limited		Policy No.:	
Insured:		Phone No.:	
Street Address:	City:	Province:	Postal Code:

**\*\*\*Please attach photo of Oil Tank\*\*\***

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|---|--|
| <p>1. Location of oil tank:<br/> <input type="checkbox"/> Inside Residence   <input type="checkbox"/> Outside Residence   <input type="checkbox"/> Underground</p> <p>Type of Tank:<br/> <input type="checkbox"/> Steel   <input type="checkbox"/> Steel with interior liner   <input type="checkbox"/> Fiberglass   <input type="checkbox"/> Other</p> <p>Is this a reconditioned tank?      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>Tank Thickness (on label)<br/> <input type="checkbox"/> 12 gauge steel (2.5 mm)      <input type="checkbox"/> 14 gauge steel (2.0 mm)</p> <p>Professionally Installed?      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>Construction Approval Label:<br/> <input type="checkbox"/> CSA   <input type="checkbox"/> ULC   <input type="checkbox"/> WH   <input type="checkbox"/> UL (to Canadian Standards)</p> <p>Spill Protection:<br/> Concrete Dam                      <input type="checkbox"/> Yes                      <input type="checkbox"/> No<br/> Leak Detection Alarm           <input type="checkbox"/> Yes                      <input type="checkbox"/> No<br/> Other Containment Devices      <input type="checkbox"/> Yes                      <input type="checkbox"/> No</p> <p>2. Tank Support (Base Construction) ("A") (See Diagram on Reverse):<br/> <input type="checkbox"/> Concrete   <input type="checkbox"/> Wooden   <input type="checkbox"/> Ground   <input type="checkbox"/> Patio Stones</p> <p>Is tank fastened with a bracket for stability?   <input type="checkbox"/> Yes   <input type="checkbox"/> No<br/> If inside, is tank filled and vented outside?   <input type="checkbox"/> Yes   <input type="checkbox"/> No<br/> Is vent stack located higher than fill pipe ("B")? <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>3. Age of oil tank ___ years.<br/> (Check tank for sticker or stamp with date)<br/> Is there a sticker or stamp?                      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>4. Any rust, dents or evidence of corrosion?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>5. Signs of leaks or oil spills, current or past?<br/> Specify: (fill pipe, vent pipe, fuel line, drain)   <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>6. Are fumes or odors evident?                      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>7. Is tank inspected and serviced annually?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>8. Is tank safe from vehicle impact?              <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> | <p>9. Is there airspace around the tank (helps provide condensation relief)?      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>10. Has the tank been painted (for corrosion protection)?                      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>11. Is the fuel supply line and valve protected from physical damage, ie. ice &amp; snow, foot traffic ("C")?                      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>12. Is tank filled regularly (keeping the tank filled helps prevent condensation – water build up inside the tank)?                      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>13. Is the tank located at least 1.6m/5 feet from any ignition source including the furnace?      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>14. Is there a loop in the fuel line supply ("D")?      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>15. If outside installation, where is the line filter located in relation to the house ("E")?      <input type="checkbox"/> Inside   <input type="checkbox"/> Outside</p> <p>16. If the oil line passes through the foundation, basement floor or in ground, is it protected?      <input type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>17. Where is the tank outlet located (supply line to furnace) (See Reverse)      <input type="checkbox"/> Top   <input type="checkbox"/> Side   <input type="checkbox"/> Bottom</p> <p>18. How many tanks are currently on the property?      <input type="checkbox"/> 1      <input type="checkbox"/> 2      <input type="checkbox"/> 3      <input type="checkbox"/> 4</p> <p>19. Are there any abandoned tanks located on this property?                      <input type="checkbox"/> Yes                      <input type="checkbox"/> No</p> <p>20. Source of water?                      <input type="checkbox"/> Well                      <input type="checkbox"/> Central Service</p> <p>21. Type of system?      <input type="checkbox"/> Hot water                      <input type="checkbox"/> Steam<br/>    <input type="checkbox"/> Central Hot Air              <input type="checkbox"/> Wood Oil Combination<br/>    <input type="checkbox"/> Other? Specify</p> <p>22. Distance to nearest neighbour?</p> <p>23. Distance to nearest lake, river, stream?</p> |
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Remarks:

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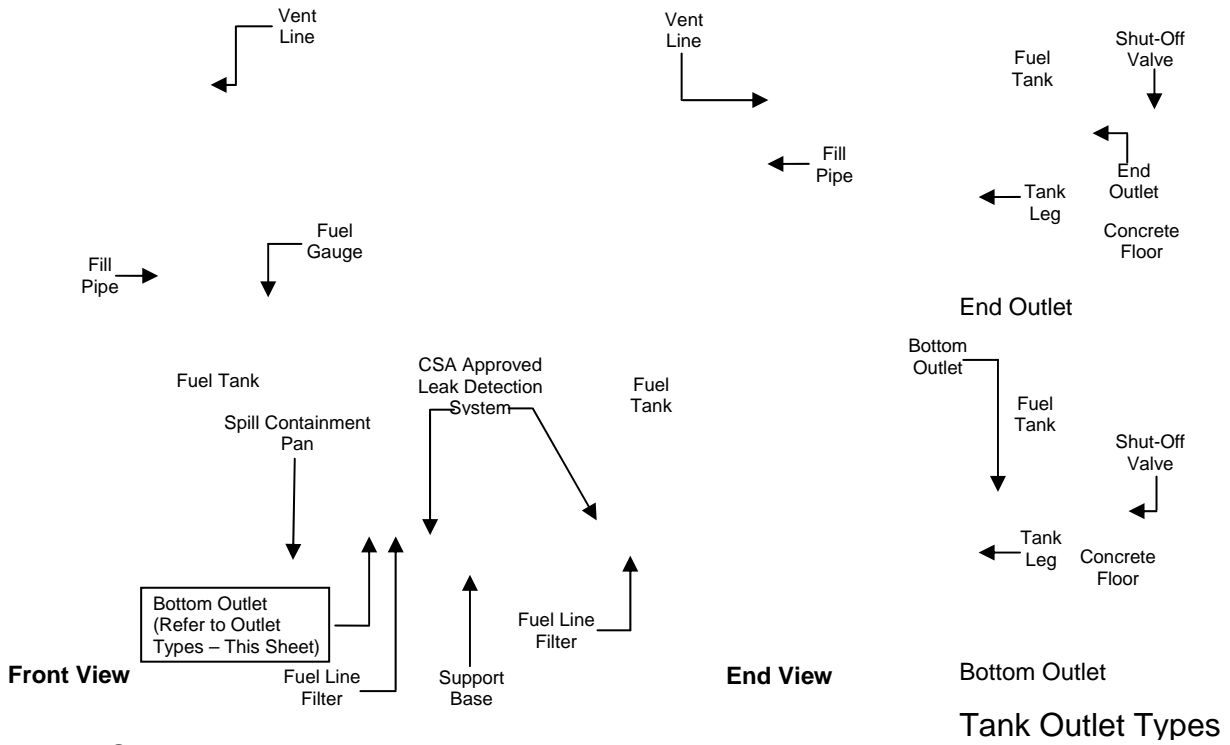


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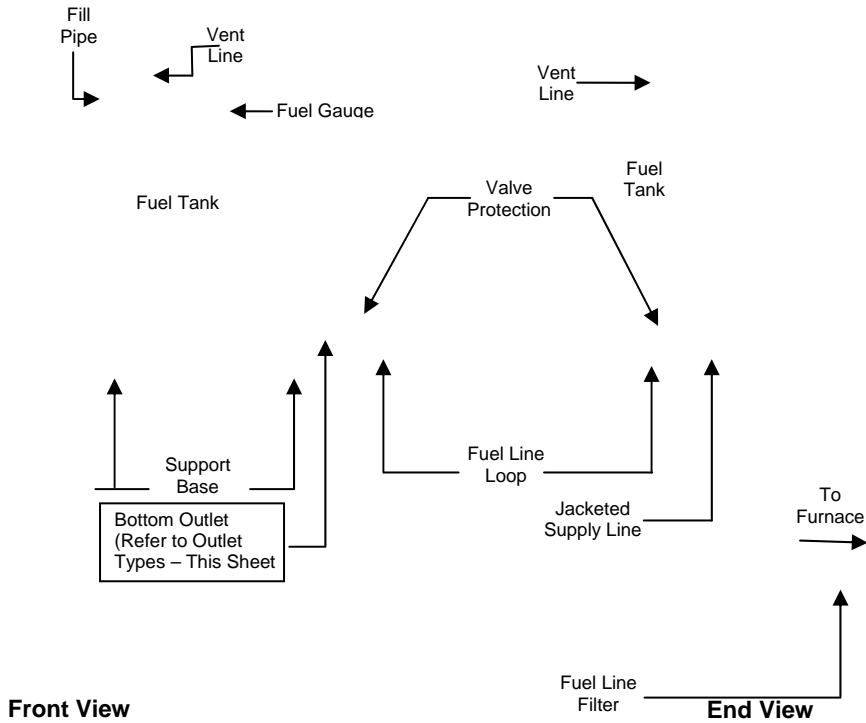
I confirm that all of the information provided on the Residential Fuel Oil Tank Questionnaire and any particulars in the Remarks section relating thereto are accurate and factual. Reports containing personal credit factual and investigative information may be sought in connection with my present policy insurance renewal extension or variation thereof.

Signature of Applicant/Insured

Date



**Furnace Oil Tank  
(Typical Inside Installation)**



**Furnace Oil Tank  
(Typical Outside Installation)**

