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# Supplementary Questionnaire Mould

Name of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

1. Please list all water damage or water-related losses in the past five years? NONE

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. Is the Applicant aware of any mould or adverse indoor air quality conditions on any past projects? YES  NO

If yes, please provide details: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. Is there an established protocol for prevention of mould and water intrusion? YES  NO

4. Is there a written reporting process for water leaks or mould issues? YES  NO

5. Does the Applicant have a procedure to handle mould or mould-related complaints? YES  NO

6. Does the Applicant contract or conduct remediation for mould? YES  NO

If yes, please confirm:

(a) Does the Applicant obtain confirmation that employees and subcontractors have Mould Awareness Certification? YES  NO

(b) Does the Applicant request certificates of insurance for mould from subcontractors? YES  NO

7. Does the Applicant contract or conduct fire and flood restoration? YES  NO

If yes, please advise the breakdown of the following operations:

(a) Water restoration/drying of building components and contents:

\_\_\_\_\_ % of firm's total revenues, \_\_\_\_\_ % subbed out.

(b) Mould remediation/abatement:

\_\_\_\_\_ % of firm's total revenues, \_\_\_\_\_ % subbed out.