

Optimum Insurance Company Inc.

SEWER BACKUP / SUMP ESCAPE QUESTIONNAIRE

Insured:	Broker:			
Address:	Policy #:			
Postal Code:	Years at this address:			
Coverage Limit:				
Is your dwelling equipped with:				Date installed
• A backflow prevention device e.g. backwater valve installed by contractor on the sewer line?	a qualified plumbing	yes	no	
If the valve is connected to the municipal sewer, is there clean	out access?			
• An automatic sump pump with automatic backup power source sump pump?	e and/or an emergency			
Are the eavestrough downspouts connected to your weeping tiles of	or sewer drain?			
Has this home had any flooding or water damage in the past 5 years?				
If yes, was the damage covered by insurance?				
If yes, please provide name of insurance company:				

Please indicate the date, type and amount of damage:

date	type	amount

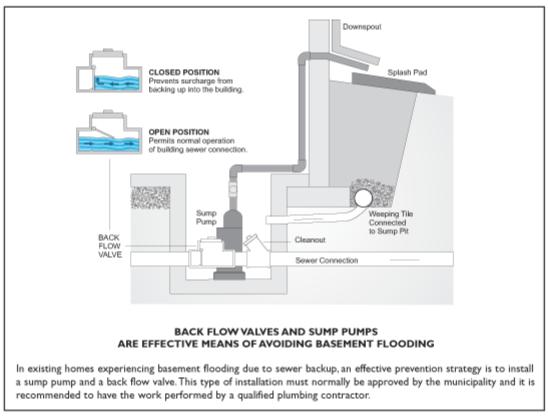
What corrective measures have been taken to prevent possible future damage:

Date

Insured's signature

The answers to the above questions are true and correct to the best of my knowledge and belief. If the person completing this questionnaire misrepresents or fraudulently omits to communicate any circumstance, that is material to be made known to the insurer, the portion of the contract/policy pertaining to water damage will be void.

Example of Sump Pump and Backwater Valve installation.



Courtesy of CMHC