



Dry Cleaners Pollution Liability

INSTRUCTIONS

1. If space is not sufficient to fully answer the question, please attach additional pages.
2. This form must be signed and dated by an owner, partner or officer of the company.
3. Attach the following items: a copy of the environmental Health & Safety Audit (if applicable), and a description of any fines, penalties or violations.

Check the coverage(s) for which you are applying for:

Site Pollution Liability Coverage (claims made)

Limits: \$250,000 \$500,000 \$1,000,000 Other: _____

Deductible: \$5,000 \$10,000 \$25,000 Other: _____

Proposed Effective Date: _____

General Liability Coverage (occurrence)

Limits: \$500,000 \$1,000,000 Other: _____

Dry cleaning operations are classified by the type of machine used at the facility. There are five generations of machines presently in use in the United States. The five types of machines are:

FIRST GENERATION – TRANSFER MACHINE:

This is similar to the washer and dryer we use in our homes. The clothes are washed in one unit with the chemicals and then transferred to a second unit for drying. The chemicals are vented to the atmosphere and there is the potential for chemicals to get on the workers clothing and skin and on the floor of the facility during the transfer. These machines are not permitted to be sold today and they cannot be converted to Dry-to-Dry machines (second generation), but they can be retrofitted with vapor control devices. These machines remained in use until the late 1960's. However, there are still a few of these types of machines still in operation.

SECOND GENERATION – DRY-TO-DRY MACHINES:

This machine combines the washer and dryer into one unit. This reduces the loss of solvent in the transfer of the clothes from one machine to the other, reduces employee injury and vents the residual vapor to the atmosphere or external control devices.

THIRD GENERATION:

These machines were in use by the late 1970's to early 1980's and are like Second Generation machines with more control devices. It is a Dry-to-Dry system with a built in refrigerator condenser. It is a closed loop system and does not vent to the atmosphere.

FOURTH AND FIFTH GENERATION:

These are closed loop systems that do not vent. They have internal vapor recovery devices.



Environmental Insurance Agency, Inc.

Dry Cleaners Pollution Liability Application

APPLICANT INFORMATION

Applicant Name: _____

Business Name: _____

Gross Receipts: Last 12 Months: _____

Next 12 Months (Estimated): _____

Mailing Address: _____

Physical Address: [] Same _____

Type of Business: [] Corporation, [] Individual, [] Partnership, [] Municipality, [] Non Profit, [] Joint Venture, [] Other _____

GENERAL INFORMATION

Have any waste materials been disposed of, buried or spilled on your property or other property? Yes [] No []

If "Yes", please explain: _____

Has any location for which you are applying for coverage ever had a leak, spill, release or discharge within the last five years?

Yes [] No []: If "Yes", please explain: _____

Has any location ever received a notice of regulatory violations, or sustained any pollution-related claims, liability lawsuits or complaints? Yes [] No []: If "Yes", please explain: _____

At the time of signing this application, are you aware of any circumstances that may reasonably be expected to give rise to a claim? Yes [] No []: If "Yes", please explain: _____

To the best of your knowledge, are you in compliance with all federal, state and local safety, health and environmental regulations? Yes [] No []: If "No", please explain: _____

Are all machines operated and maintained in accordance with manufacture specifications and recommendations? Yes [] No []: If "No", please explain: _____

When waste solvents are picked up for offsite disposal/recycling, do you receive a manifest from the company that collects it? Yes [] No []: If "No", please explain: _____

Which cleaning solvents are being used or do you use? Perc. [] Petroleum [] Other [] _____

ARE THERE COMMENTS YOU WOULD LIKE TO ADD? _____



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Please complete the following page for EACH facility. All questions must be answered. Please copy and attach additional sheets if needed.

FACILITY INFORMATION

Facility Name: _____

Facility Address: _____

How long has this site operated as a dry cleaner? _____ [] Years, [] Months, [] Weeks, [] Days, [] New Business

Who was the previous occupant? _____

How long was the previous occupant at this location? _____

Please describe the operations on the properties immediately adjacent to yours. If none, please state "NONE":

NORTH: _____

WEST: _____

EAST: _____

SOUTH: _____

BELOW: _____

How many machines are on these premises? _____

What generation machines are being used? (You may select more than one) [] 1st, [] 2nd, [] 3rd, [] 4th, [] 5th

What are the install years of each machine being used? _____

If any machine's install year is prior to 1980, has the machine(s) been retrofitted? [] Yes, [] No

If "Yes", what is the year of retrofit for each machine? _____

Please describe the upgrades done to each machine(s): _____

How much solvent is used in each machine per month? (working and clean tanks, US gallons) _____

Describe any storage of the solvents outside the machine(s): _____

If you use storage tanks for solvent storage, please complete "Appendix A" on the next page.

Was the cleaning equipment installed prior to 1991? [] Yes, [] No

Does each machine have secondary containment? [] Yes, [] No

Do you have an active leak detection program? [] Yes, [] No

What form of leak detection do you use? _____

Is the floor of the work area painted with OSHA approved paint to resist solvent absorption? [] Yes, [] No

What is the floor surface and/or coating? [] Concrete [] Epoxy Coated [] Other: _____

Loss History: Any prior losses within the past three years? [] Yes, [] No If "Yes", please explain: _____

I certify that the statements set forth in this application are correct. If any information supplied on this application should change between the date of this application and the inception date of the policy period, I will immediately notify the insurer of such changes. I agree that this application shall be deemed to be attached to and made part of the policy if issued, as if physically attached to the policy. I also understand that any misrepresentation of information contained in this application could result in the policy being voided.

I understand that the insurance company will rely on the information provided by me in this application as the basis for deciding whether an insurance policy will be issued.

I hereby authorize the insurance company to make any inquiry in connection with this application as the company deems necessary. The undersigned hereby authorizes the release of loss information from any prior insurer to the insurance company. In this regard I certify that I will execute whatever authorizations or releases that may be necessary to permit the insurance company to secure any such information.

APPLICANT'S SIGNATURE _____ DATE: _____

TITLE _____



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APPENDIX A

Please complete the information requested in the following fields. Please copy and attach more pages if needed.

TANKS	1	2
Tank ID Number (yours)		
Underground (U) or Aboveground (A)		
Date Installed (Mo/Yr)		
Capacity (US Gallons)		
Tank Construction		
Tank Contents		
Leak Detection (Yes/No)		
Date of last Tightness Test (Mo/Yr)		
Spill Catchment Basin? (Yes/No)		
Overfill Device? (Type Used)		
PIPING		
Piping Construction		
Pump System		
Line Leak Detectors? (Yes/No)		
Date of last Tightness Test (Mo/Yr)		

APPLICANTS WITH ABOVE GROUND STORAGE TANKS, PLEASE COMPLETE THE FOLLOWING:

Describe any secondary containment. Indicate the type of containment and it's construction material, i.e., concrete diking, double walled tanks, etc.:

Tank pad construction material: _____

If concrete, has it been sealed? [] Yes, [] No

If "Yes", what is the length of piping underground? _____ (US Feet)

What was last Tightness Test date? _____ / _____ / _____

Is testing scheduled? [] Yes, [] No