

HUB INTERNATIONAL INSURANCE BROKERS

DRAYTON VALLEY OFFICE * (780) 542-3968 Box 5296, DRAYTON VALLEY, AB T7A 1R4 www.hubinternational.com



LIABILITY WORKSHEET FOR NUNAVUT TOURISM PROGRAM

NAME OF COMPANY	:	
NUNAVUT TOURISM	MEMBERSHIP NUMI	BER:
NAME OF ALL OWNE	RS:	
MAILING ADDRESS:		
		OTHER:
WEBSITE:		EMAIL:
DO YOU HAVE ALL CL	IENTS SIGN WAIVERS:	? □ YES □ NO □ COPY OF WAIVER ATTACHED
☐ TOTAL ANNUAL F TOTAL ANNUAL F > IF YOU SELL OF HAVE YOU / YOUR O	REVENUES (Gross) OVEREVENUES FROM SALER SERVE LIQUOR: COMPANY HAD ANY C	DER \$250,000 – CONTINUE WITH WORKSHEET & PRICING BELOW ER \$250,000 – CONTINUE WITH WORKSHEET & SUBMIT TO OUR OFFICE FOR PREMIUM QUOTATION LE OF ALCOHOL IN EXCESS OF \$20,000 – REFER TO OUR OFFICE SELL SERVE Annual Revenue from Liquor Sales: \$ CLAIMS OR LOSSES IN PAST 5 YEARS? YES NO DETAILS:
CLASS 1: UNDER CI Lodging / CLASS 2: Class 1 wi Wildlife ' CLASS 3 Canoeing Other (Specify):	Wilderness Lodge □ R ith revenues in excess of Fours (on land) □ Boati g / Kayaking □ Dogsledo	NNUAL REVENUES OF \$75,000 Restaurant (NO Alcohol) □ Hunting □ Fishing □ Camping / Hiking \$75,000 □ Restaurant with Alcohol (Alcohol sales max \$20,000)



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UMBRELLA QUESTIONNAIRE UNDERLYING POLICY DETAILS				
POLICY TYPE	LIABILITY LIMIT	COMPANY & POLICY #	EXPIRY DATE	
Homeowners / Farm				
Automobile				
ATV				
Watercraft				
Other:				

NUNAVUT TOURISM LIABILITY QUESTIONNAIRE
A COPY OF YOUR WAIVER
A COPY OF YOUR CLIENT CONTRACT
Send paperwork by fax to (780) 542-7775 or email to penny.leessmith@hubinternational.com

ONCE ABOVE WORKSHEET IS COMPLETED – PLEASE INCLUDE THE FOLLOWING: