



6. a) Please provide details of all Abuse Liability Insurance carried in the past three years:

Insurer	Period	Limit	Deductible	Premium

b) Indicate the type of Abuse Liability Insurance carried:  Claims-Made?  Occurrence Basis?

**DECLARATION**

**The undersigned declares that he/she is duly authorized by the proposed Insureds to complete and sign this application on their behalf and that the statements set forth herein are true and complete.**

**The undersigned agrees that:**

- i) the signing of this application does not bind the undersigned, the proposed insureds or Royal & SunAlliance Insurance Company of Canada to effect insurance;**
- ii) this application and all additional information provided herewith shall be the basis of the contract, should a policy be issued, and shall be deemed to be attached to and shall form part of the policy;**

\_\_\_\_\_  
Signature of Insured

\_\_\_\_\_  
Title / Position

\_\_\_\_\_  
Date