

# Pollution Legal Liability Questionnaire

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## INSTRUCTIONS

A. This questionnaire requires that contact persons be provided for each location. The applicant is responsible for obtaining and reviewing whatever records is available, whether in their possession or in the public domain, which are necessary in order to answer any of the questions in this application.

B. Once this questionnaire is received, a member of our staff will contact person(s) you provided in Section A in order to continue the application process, if additional information is required or missing.

C. This questionnaire should be completed with the assistance of the senior environmental employee on the company's site.

D. Attach as much information as you can obtain from your site contact (i.e. site diagram, Spill Control Plan, list of tanks and capacities, list of raw materials/quantities, Pollution Control Plan, Emergency Response Plan, Environmental Training Schedule, copies of permits, etc.).

E. Complete the questionnaire to the best of your ability. If you cannot answer a question, state that there was not enough information, no one on-site knew the answer, or contact Insurer for assistance.

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

*Completed By:* \_\_\_\_\_

*Contacts:* \_\_\_\_\_

### **COMPANY NAME AND ADDRESS:**

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

### **DESCRIPTION OF PRINCIPAL OPERATIONS:**

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

- Describe the principal business at this location.
- Ask account contact if they have anything in writing describing their operations (Brochures, Marketing Materials, etc.).
- Ask contact for a site plan/site diagram and attach, if available.

### **2. Site History: Description of past occupancies & land use.**

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

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**3. Surrounding Environmental & Land Use:** Describe the surrounding environment/land use and proximity to all industrial complexes, warehouses, parking lot, schools, residential properties, public buildings, farmland, vacant land, landfills, drum storage area, sensitive habitats, waterways, drinking wells, etc:

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**4. How long has your company occupied this site?** \_\_\_\_\_

**5. Describe the existing operational facilities**

- Size of Property
- Number of Buildings – size, type of construction, etc.
- Sanitary waste water facilities
- Manufacturing and production operations
- Land surface (e.g., vegetation, asphalt, concrete)
- Underground process piping, trenches, sumps, pits, dry wells
- Support facilities (e.g, machine shops, maintenance shops, etc.)
- Underground storage tanks

**6. Description of the container/drum storage areas:**

- How many storage areas are there on-site?
- What are the quantities stored on-site?
- What type of secondary containment is provided for the container/drum storage areas? (i.e. earthen dikes, concrete dikes, liners, leak/spill detection sensors, etc.)

**7. Description of the aboveground storage tank areas:**

- How many aboveground tanks are there on-site?
- What is the combined tank capacity of all the aboveground tanks?
- What do the aboveground storage tanks contain (attach a list of all aboveground tanks and their contents if available)?
- What is the tank construction of the aboveground storage tanks?
- What is the age of the aboveground storage tanks?
- What type of secondary containment is provided around each tank? (i.e. earthen dikes, concrete dikes, liners, leak/spill detection sensors, etc.)
- Are tank/vessel inspections conducted periodically to ensure the tanks are in good condition and not leaking? Yes ( ) No ( )
- If “Yes”, who conducts the tank/vessel inspections?
- Are the tank/vessel inspections documented? Yes ( ) No ( )
- When were the last tank/vessel inspections conducted (attach copy of the last tank/vessel inspection)?

**8. Have any environmental surveys, audits or investigation been conducted at the site within the past five years?** Yes ( ) No ( ) If “Yes”, please forward a copy.

9. **Have there been any previous pollution events on the Site (i.e. spills, releases, fires, explosions)?** Yes ( ) No ( ) If “Yes”, please provide available documentation

10. **Is there any existing soil or groundwater contamination on-site?** Yes ( ) No ( )  
If “Yes”, please provide available documentation

11. **Are there any ongoing/planned soil or groundwater remediation projects at the site?** Yes ( ) No ( ) If “Yes”, please describe each project, indicating the availability design documents, government agencies involved, public participation, schedule for project completion, estimated costs.

12. **Are there any environmental lawsuits pending against the site?** Yes ( ) No ( )  
If “Yes”, please provide available documentation

13. **Are there any on-site groundwater monitoring wells?** Yes ( ) No ( )

- Why were the monitoring wells installed?
- If “Yes”, how many wells are there on site?
- How often are samples taken and analyzed?
- Who conducts the sampling?
- Any groundwater problems noted to date? Yes ( ) No ( )
- Describe any known groundwater problems on-site:
- Describe any known groundwater problems off-site:
- What is the direction of the groundwater flow at the site?

14. **Describe the types of raw materials (solids and liquids) stored on-site:**

- Describe the quantities of raw materials stored on-site:
- Describe the method of raw material storage on-site:
- Describe the environmental controls utilized to control the various types of raw materials stored on-site (i.e. tanks, dikes, physical barriers, dust control procedures, etc.):
- How much of the raw materials are used annually?

15. **Is any waste currently disposed on-site?** Yes ( ) No ( ) N/A ( )

If “Yes”, please provide the following

- Type
- Materials or raw waste?
- Number of years waste has been stored on-site
- Does the site have a waste permit
- Amount
- Hazard class/regulatory status
- Method of storage (landfill, surface impoundment, deep well injection, including depth, incineration, other.
- Construction, age, and maintenance

16. **Does the facility have a Wastewater Permit?** Yes ( ) No ( ) N/A ( )

- What types of wastewater does the facility produce (i.e. Storm water run-off, process water, etc.)?
- Describe the wastewater treatment process (attached information from the client, if available).
- Where does the company discharge its wastewater?
- Public Treatment Facility? Yes ( ) No ( ) N/A ( )

- Public Storm Water System? Yes ( ) No ( ) N/A ( )
- Lake? Yes ( ) No ( ) N/A ( )
- River? Yes ( ) No ( ) N/A ( )
- Stream? Yes ( ) No ( ) N/A ( )
- Lagoon? Yes ( ) No ( ) N/A ( )
- Deep well injection? Yes ( ) No ( ) N/A ( )
- Other:
- Has the facility ever exceeded permit limits? Yes ( ) No ( ) N/A ( )
- If the company has ever exceeded its Wastewater Permit, describe the instances when the permit was exceeded (i.e. chemicals, etc.):

17. ***Does the company have an Air Permit at this site?*** Yes ( ) No ( ) N/A ( )

- Are there any air monitoring/control systems on-site? Yes ( ) No ( )
- If “Yes”, describe the air monitoring systems on-site:
- Has the facility experienced any air problems (indoor or outdoor)? Yes ( ) No ( )
- If “Yes”, describe these air problems mentioned by management:

18. ***Does the facility have any other environmental permits?*** Yes ( ) No ( ) N/A ( )

- If “Yes”, describe the other permits:

19. ***Are there any requirements or plans to install or upgrade air pollution control devices or wastewater treatment equipment?*** Yes ( ) No ( ) N/A ( )

- If “Yes”, please provide available documentation describing the equipment to be installed or upgraded and the reason for the project.

20. ***Has the facility received any notices of violation?*** Yes ( ) No ( ) N/A ( )

- If “Yes”, what fines were levied against the company?
- What steps were taken to correct the problems?

21. ***Has the facility received any Consent Orders?*** Yes ( ) No ( ) N/A ( )

- If “Yes”, what fines were levied against the company?
- What steps were taken to correct the problems?

22. ***Has the facility received any other environmental violations?*** Yes ( ) No ( ) N/A ( )

- If “Yes”, what fines were levied against the company?
- What steps were taken to correct the problems?

23. ***Does the company have any of the following Plans?***

- Is there an Emergency Response Plan in place? Yes ( ) No ( )
- If “Yes”, please attach a copy
- Is there a Spill Control Plan in place? Yes ( ) No ( )
- If “Yes”, please attach a copy
- Is there Fire Protection Program in place? Yes ( ) No ( )
- Is there an on-site Emergency Response Team: Yes ( ) No ( )
- If “Yes”, what is the experience and training of the team members?

24. ***Is the company planning on divesting any location during the upcoming policy period?*** Yes ( ) No ( ) N/A ( )

- If “Yes”, provide details on which locations.

25. ***Does the company anticipate redevelopment or development projects at any sites***

during the upcoming policy period? Yes ( ) No ( ) N/A ( )

- If “Yes”, provide information on these planned projects.
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**1. Has waste historically been transported & disposed of off-site? Yes ( ) No ( ) N/A ( )**

**If “Yes”, please provide the following:**

- What Type of off-site waste disposal/treatment facility(ies) does the company use?
- Landfill Yes ( ) No ( ) N/A ( )
- Surface Impoundment Yes ( ) No ( ) N/A ( )
- Deep well injection Yes ( ) No ( ) N/A ( )
- Waste Incineration Yes ( ) No ( ) N/A ( )
- Other \_\_\_\_\_
- Name and address of the disposal/treatment facility(ies) used
- Description on the type of material disposed
- Quantity
- Does the disposal site have a waste permit

**2. Are 3<sup>rd</sup> Party Carriers used to transport waste or products off-site?**

- Provide the names and address of the 3<sup>rd</sup> Party Carrier.
- Type of Material transported
- Amount of material
- Number of trips/year
- Distance/trip
- Does the 3<sup>rd</sup> party carrier load or unload the material?
- Yes ( ) No ( ) N/A ( ) If “Yes”, please provide their procedures.
- Transporter selection procedures
- Does the transporter have insurance coverage? If so what type?
- Is the company named as additional Insured on the policy?

**3. Are non-owned locations used to store products?**

- Provide the names and address of the 3<sup>rd</sup> Party Locations
- Type of Material Stored
- Amount of each material
- Packaging for material
- Description of facilities (flooring, storage facilities, secondary containment structures, fire protection, special handling procedures)
- Are there dedicated areas for your products?
- Are there any known environmental liabilities at the 3<sup>rd</sup> Party Locations?
- Do the 3<sup>rd</sup> Party Locations have insurance coverage? If so what type?
- Are the owners of the 3<sup>rd</sup> Party Locations additional insured on the policy?

**4. Do you (insured) transport Products off-site with owned vehicles? Yes ( ) No ( ) N/A ( )**

**If “Yes”, please provide the following:**

- Description on the type of products transported
- Quantity
- How is the product shipped?
- Containers, drums, bulk, etc
- Trailer, rolling stock, ship, etc.
- Who performs the loading and unloading?

- Number of trips/year
- Distance/trip
- Driver training procedures
- Driver selection procedures and driver record review

**PLEASE COMPLETE THE QUESTIONS BELOW WHEN REQUESTING THE FOLLOWING COVERAGE:**

**Coverage Underground Storage Tanks**

*1. Description of the underground storage tank areas:*

- How many underground storage tanks are there on-site?
- What is the capacity of each underground storage tank(s)?
- What do the underground storage tanks contain (attach a list of all aboveground tanks and their contents if available)?
- What is the construction of the underground storage tanks?
- What is the age of the tanks?
- Is leak detection provided for each tank? Yes ( ) No ( )
- If “Yes”, what type of leak protection is provided for the underground storage tanks?
- Are tank/vessel inspections conducted periodically to ensure the tanks are in good condition and not leaking? Yes ( ) No ( )
- If “Yes”, who conducts the tank/vessel inspections?
- Are the tank/vessel inspections documented (attach a copy of the last inspection to this report)?
- When was the last tank/vessel inspections conducted?
- Describe or attach any Tank Management Program the company has in place?
- Do each of your underground storage tanks comply with local regulations (upgrade, monitoring requirements)?

**Additional Details: (compulsory)**

**Nationality:** Indian  Non – Indian

If Non-Indian, please specify Country: .....

**Type of Organization**

Corporations  Governments  Non Governmental Organizations  Society

International Organization  Trust  Partnership  Cooperatives

Section 25 Company

**OTHER INFORMATION**

1. PAN CARD Number (10 Digit Number)

2. Sources of funds :

Salary  
Specify)

Business

Investments

Other (Please

## Declaration

The Applicant represents that the above statements and facts are true and that no material facts have been suppressed or misstated.

Completion of this form does not bind coverage. Applicant's acceptance of Insurer's quotation and Insurer's written agreement to be bound, is required to bind coverage and to issue policy. It is agreed that this form shall be the basis of the contract should a policy be issued, and will be attached to the policy.

All written statements and materials furnished to the Insurer in conjunction with this application are hereby incorporated by reference into this application and made a part hereof.

If an order is received, the application is attached to the policy so it is necessary that all questions be answered in detail.

I/we hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act, 2002.

I understand that the Company has the right to call for documents to establish sources of funds.

The insurance company has right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

**Signed**.....

**Title** .....

*(to be signed by a director of the Company)*

**Company**..... **Date** .....