

OIL HEAT QUESTIONNAIRE

Please attach photographs of tank



BROKER	BROKER NUMBER	POLICY NUMBER
INSURED	DATE (DD/MM/YY)	
STREET ADDRESS	CITY	PROVINCE
POSTAL CODE		

1 Location of tank
 Inside tank Outside tank Underground

How many fuel tanks are on the property? _____
 (If two or more oil tanks, a separate questionnaire must be completed for each tank)

What is the total storage volume? _____ litres

Are there any unused or abandoned tanks on property? Yes No

2 (Refer to the label on tank to answer the following three questions)
 Type of oil tank
 Steel (10 gauge) Steel (12 gauge) Steel (14 gauge)
 Fiberglass Other _____

Name of Manufacturer: _____

3 Construction approval label
 CSA ULC WH
 UL (Canadian Standards) None
 Unknown Homemade

4 Age of oil tank: year _____ Manufacturer sticker year: _____ Tank installation year: _____

Was the tank new when installed? Yes No

Has the tank been painted since date of purchase? Yes No

5 Oil tank support
 Concrete slab Concrete stone Wood
 Other _____

6 Spill protection None Concrete dam
 Other _____

7 What is the grade of the property?
 Level lot Slow incline Steep incline

8 Is there a water source (including well) near or on the property? Yes No

If "Yes", what type of source? Natural Well

What is the distance from the tank to the water source? _____ km

Comments _____

9 Where is the fuel line located? Above ground Under ground

10 For outdoor tanks, is there a loop in the fuel line? Yes No

11 Does the fuel line pass through the ground, basement floor, or foundation? Yes No

If "Yes", is the line protected? Yes No

If "Yes", what is the protector type? Plastic Steel

Other _____

12 How often is the tank inspected or serviced by a certified or licensed oil-heating contractor? _____

Name of the heating contractor: _____

How often is the filter replaced? Every _____ Month(s)

13 Is the vent pipe installed higher than the fill pipe? Yes No

Are the fill & vent pipes clear of all debris? Yes No

14 Is there any tank rust, dents or evidence of corrosion? Yes No

Are there any signs of leaks or spills? Yes No

If "Yes", Current spills Past spills

15 Is the tank filled regularly, even in the summer months? Yes No

Is there airspace around the tank to prevent condensation? Yes No

16 Is the tank clear of materials and/or storage? Yes No

Is the tank safe from vehicle impact? Yes No

17 For indoor tanks, what is the distance from the fuel tank to furnace? _____ feet

Is the tank at least 5 feet from an ignition source (i.e. woodstove, wood furnace, hot water heater)? Yes No

Authorized Signature _____ Date _____

For Company Use Only

LOCATION #	NAME	DATE
------------	------	------