



# BMS INSURANCE SOLUTIONS FOR YOU & YOUR BUSINESS

Name of Applicant (first last): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province/Territory: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

\*Please advise BMS if your contact details have changed in order to continue to receive information pertaining to your insurance.

Note: This coverage is only available to members who are domiciled in Canada. Please confirm you understand and agree to the eligibility requirements.

Are you renewing this insurance policy?  Yes  No

If you are renewing your insurance policy after its expiry date and outside of the renewal period, please confirm that you understand that the effective date of this policy will be the date on which payment is received, and the policy is finalized.

## Business Details

Only complete this section for or on behalf of your own business. **Do not** complete this section for or on behalf of someone else's business or a business where you are employed or contracted to.

Do you operate a business as a Dietitian for which you require insurance?  Yes  No

If yes, please provide your primary entity / business name (please list all operating names related to the business).

Entity / Business Name: \_\_\_\_\_

Location Address (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ Province/Territory: \_\_\_\_\_ Postal Code: \_\_\_\_\_

If you own / operate more than one business or corporation, additional coverage may be recommended.

Do you own more than one entity/business name for which you require coverage?  Yes  No

If yes, please provide details.

\_\_\_\_\_

## Membership Information

In order to be eligible for this insurance program, you must be a member of Dietitians of Canada. If you are not a member, this policy is null and void. Please confirm you understand and agree to the eligibility requirements.

Are you a member in good standing with Dietitians of Canada?  Yes  No

DC Membership Number:

## Applicant Details

Do you or your business provide professional services outside the scope of Dietitian, for which you require insurance coverage? Note that claims arising from delivery of other professional services, including proceedings conducted by a professional organization and or/ provincial College other than one regulating the practice of a Dietitian, are not covered by this insurance.  Yes  No  
If yes, please provide details.

Do you provide in-person services outside of Canada?  Yes  No  
If yes, please provide details.

Dietitians of Canada continue to administer the Individual Professional Liability and Individual Commercial General Liability insurance. Please confirm you have this coverage in place.

## Business Commercial General Liability

Business Commercial General Liability (CGL) protects you against claims arising from injury or property damage that you or your business may cause to another person as a result of your operations and/or premises. For example, a client may slip and fall on a wet floor on your premises or you may accidentally cause property damage during a home visit.

### Deductibles:

Property Damage            \$500

Would you like to purchase Business Commercial General Liability?  Yes  No  
If yes, please select an option below.

| Number of Professional Staff | Limit   | Cost                              |
|------------------------------|---|-----------------------------------|
| 1-5 Professionals            | Shared with Individual Commercial General Liability | <input type="checkbox"/> \$37     |
| 6-10 Professionals           | Shared with Individual Commercial General Liability | <input type="checkbox"/> \$58     |
| 10+ Professionals            | Shared with Individual Commercial General Liability | <input type="checkbox"/> Referral |

## Business Professional Liability

Business Professional Liability is recommended for businesses with other professionals working for or on behalf of your business and/or billing under your business name.

This policy responds if your business name is brought into a statement of claim or lawsuit alleging negligence or malpractice.

Would you like to purchase Business Professional Liability?  
If yes, please select an option below.

Yes  No

| Number of Professional Staff | Limit   | Cost                              |
|------------------------------|---|-----------------------------------|
| 1-5 Professionals            | Shared with Individual Professional Liability | <input type="checkbox"/> \$51     |
| 6-10 Professionals           | Shared with Individual Professional Liability | <input type="checkbox"/> \$100    |
| 10+ Professionals            | Shared with Individual Professional Liability | <input type="checkbox"/> Referral |

## Contents, Crime & Business Interruption

**Contents** includes items usual to a clinic, including professional equipment, desks, chairs, filing cabinets and computers, as well as any stock and improvements and betterments for which you are responsible. Equipment Breakdown is also included.

**Crime** coverage protects against financial loss due to dishonesty, fraud, or theft of money, securities or other property owned by the clinic.

**Business Interruption** insures against loss of income resulting from direct physical loss or direct physical damage to the premises by an insured peril (e.g. fire).

If you anticipate undergoing any renovations in your office space within the policy term, please contact BMS directly at 1-844-200-7210 to ensure you are adequately covered

### Deductibles:

|              |          |
|--------------|----------|
| Contents     | \$1,000  |
| Flood        | \$10,000 |
| Sewer Backup | \$2,500  |
| Earthquake   | 5% min   |

Would you like to purchase Contents, Crime and Business Income coverage?  
If yes, please complete the fields below.

Yes  No

| Option   | Contents Limit | Cost                           |
|----------|----------------|--------------------------------|
| Option A | \$10,000       | <input type="checkbox"/> \$220 |
| Option B | \$25,000       | <input type="checkbox"/> \$290 |
| Option C | \$50,000       | <input type="checkbox"/> \$420 |

Have you ever made a Property claim?  
If yes, please provide details.

Yes  No

Do you have any single piece of equipment worth more than \$5,000?  
If yes, please provide details and the value.

Yes  No

Do you operate a mobile business?

Yes  No

If yes, we recommend that you add a Miscellaneous All Risk Property Floater to your policy to insure this property for losses that may occur while away from your insured premises.

If yes, what is the value of contents (equipment, stock) that you travel with at any given time?

### Co-Insurance

Coinsurance is a penalty imposed on the insured by the insurance carrier for under reporting/declaring/insuring the value of tangible property or business income. The penalty is based on a percentage stated within the policy and the amount under reported. In this policy you have a co-insurance requirement of 90%. As an example:

If the value of the contents you are insuring is \$150,000 and the policy contains a 90% co-insurance clause; this means you should purchase at least \$135,000 in coverage. If you were only purchasing \$100,000 coverage and had a loss of \$100,000, the insurance company would pay based on the following formula:

Amount of insurance in place % Amount of insurance that should have been in place x Amount of the loss = Amount paid, less any deductible

For example, \$100,000 % (\$150,000 x 90%) x \$100,000 = \$74,074 payment for loss (less deductible)

BMS recommends that your insurable values be reviewed and appropriately appraised to ensure you are purchasing the correct content and property limits.

I understand the co-insurance clause and have selected an adequate contents limit.

## Cyber Security and Privacy Liability – ENHANCED

Cyber liability continues to be an ever-evolving area of risk. You have access to a comprehensive Cyber Security and Privacy Liability policy to protect against claims arising out of the theft, loss, or unauthorized disclosure of identifiable information, which includes First- and Third-Party coverage and Breach Response Services.

This policy is designed to provide protection against the risk of holding increasingly large quantities of personally identifiable data of clients, employees, and others, and to mitigate the reputational damage resulting from a data security breach.

### Breach Response

|  |  |
|--|--|
| Additional Breach Response Costs                     | \$500,000 (NEW)                        |
| Legal, Forensic & Public Relations/Crisis Management | \$250,000                              |
| Notified Individuals                                 | 5,000 (Individual), 100,000 (Business) |

|  |                                      |
|--|--------------------------------------|
| <b>Policy Aggregate Limit of Liability</b>             | \$1,000,000                          |
| <b>First Party Loss</b>                                |                                      |
| Business Interruption - Resulting from Security Breach | \$100,000 (NEW – HIGHER LIMIT)       |
| Cyber Extortion Loss                                   | \$500,000 (NEW – HIGHER LIMIT)       |
| Data Recovery Costs                                    | \$100,000                            |
| <b>Liability</b>                                       |                                      |
| Data & Network Liability                               | \$1,000,000                          |
| Regulatory Defense & Penalties                         | \$1,000,000 (NEW – HIGHER LIMIT)     |
| Payment Card Liabilities & Costs                       | \$1,000,000                          |
| Media Liability  | \$1,000,000                          |
| <b>eCrime</b>  |                                      |
| Fraudulent Instruction*                                | Available for additional premium     |
| Funds Transfer Fraud                                   | Included with Fraudulent Instruction |
| Telecommunications Fraud                               | \$100,000                            |
| <b>Criminal Reward</b>                                 |                                      |
| Criminal Reward  | \$50,000 (NEW – HIGHER LIMIT)        |
| <b>Computer Hardware Restoration</b>                   | Included (NEW)                       |
| <b>Deductibles</b>                                     |                                      |
| Each Incident  | \$1,000                              |
| Notified Individuals                                   | 100                                  |

Would you like to purchase Cyber Security & Privacy Liability coverage?  
If yes, please complete the fields below.

Yes  No

| Gross Revenue                                       | Annual Premium                   |
|---|----------------------------------|
| Individual Practitioners / Business (just yourself) | <input type="checkbox"/> \$121   |
| Business & Employees - \$0 to \$500,000             | <input type="checkbox"/> \$675   |
| Business & Employees - \$500,001 to \$1,000,000     | <input type="checkbox"/> \$1,023 |
| Business & Employees - \$1,000,001 to \$1,500,000   | <input type="checkbox"/> \$1,284 |
| Business & Employees - \$1,500,001 to \$2,000,000   | <input type="checkbox"/> \$1,578 |
| Business & Employees - \$2,000,001 to \$2,500,000   | <input type="checkbox"/> \$1,776 |
| Business & Employees - \$2,500,001 to \$3,000,000   | <input type="checkbox"/> \$1,873 |
| Business & Employees - \$3,000,001 to \$3,500,000   | <input type="checkbox"/> \$2,017 |
| Business & Employees - \$3,500,001 to \$4,000,000   | <input type="checkbox"/> \$2,159 |
| Business & Employees - \$4,000,001 to \$4,500,000   | <input type="checkbox"/> \$2,298 |

Business & Employees - \$4,500,001 to \$5,000,000  \$2,434

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Business & Employees - Above \$5,000,001  Referral

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Has any Cyber claim or lawsuit been made against you/your business, or is any such claim now pending against you/your business?  Yes  No  
If yes, please provide details.

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Are you aware of any facts, circumstances or situations, which may reasonably give rise to a claim against you/your business?  Yes  No  
If yes, please provide details.

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Have you/your business ever had a cyber security / privacy breach and/or network security incident in the past or has such a claim been made against you/your business?  Yes  No  
If yes, please provide details.

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#### Statement of Facts including condition precedent requirements

The following items are important risk mitigation strategies and are required by the insurer for coverage to be secured. Please confirm the following is accurate:

IT IS A CONDITION PRECEDENT FOR COVERAGE UNDER THIS POLICY THAT ALL THE BELOW ITEMS ARE SATISFIED. IF ANY OF THE BELOW STATEMENTS ARE NOT MET THEN NO COVERAGE SHALL BE PROVIDED UNDER THIS POLICY FOR ANY DAMAGES, CLAIMS EXPENSES, PENALTIES, PRIVACY BREACH RESPONSE SERVICES, PCI FINES EXPENSES AND COSTS, CYBER EXTORTION LOSS, DATA PROTECTION LOSS, BUSINESS INTERRUPTION LOSS.

Please confirm the following is accurate:

I/my business implements loss control measures such as: Antivirus software, a firewall, and/or regular software patch installations.

I/my business regularly back-up critical data to a separate location that would be unaffected by an issue with your live environment.

I/my business use multi-factor authentication (MFA) for cloud based services (Such as cloud based email account access) and for all remote access to your network; or if No, I/my business use Jane, Clinicmaster, owl practice or Practiceperfect.

For those systems which have an on-premises network only: I/my business only allow(s) remote access into our environment with a virtual private network (VPN). Note: This does not apply if your systems are entirely cloud based.

I confirm the above statements are true and accurate.

I also confirm the following:

I/my business take and/or provide cyber security awareness training **at least once annually**, including anti-phishing.

For businesses, this includes training for all individuals who have access to your organization’s network or confidential/personal data. Resources can be found at [www.getcybersafe.gc.ca](http://www.getcybersafe.gc.ca). **You are not required to provide proof to BMS.**

I confirm the above statement is true and accurate.

**\*Additional Coverage Available**

If you/your business transfers funds, BMS recommends you consider adding Fraudulent Instruction/Funds Transfer Fraud coverage.

**Fraudulent Instruction** coverage provides a limit of up to \$100,000 for claims resulting directly from you/your insured business having transferred, paid, or delivered any Money or Securities as a direct result of Fraudulent Instructions (i.e.: a fraudulent written instruction, electronic instruction (including email or web-based instruction) or telephone instruction provided by a person purporting to be a Vendor, Client, or an Authorized Employee, that is intended to mislead an Insured through the misrepresentation of a material fact that is relied upon in good faith by such Insured).

**Funds Transfer Fraud** means the loss of Money or Securities contained in a Transfer Account at a Financial Institution resulting from fraudulent instructions by a third party issued to a Financial Institution directing such institution to transfer, pay or deliver Money or Securities from any account maintained by you/your insured business at such institution, without you/your insured business’s knowledge or consent.

\$25,000 limit for **\$230 / year**

\$100,000 limit starting from **\$335 / year**

Would you like BMS to contact you regarding a quote for Fraudulent instruction coverage?  Yes  No  
If yes, an additional questionnaire is required to be completed and will be sent to you separately.

**NEW! Personal & Family Cyber Protection** (not available for QC members)

Safeguarding your personal information online is more important than ever before!

- ✓ Access to Cybersecurity professionals
- ✓ Cyber Bullying & Extortion Expense coverage
- ✓ Online Fraud Protection
- ✓ Identity Theft Recovery
- ✓ Credit Monitoring
- ✓ Lost Wallet
- ✓ Social Media & Dark Web Monitoring
- ✓ Restoration Costs

Would you like to purchase Personal & Family Cyber Protection?  Yes  No  
If yes, please see select an option below.

| Each Claim / Aggregate Limit | Cost                          |
|------------------------------|-------------------------------|
| \$10,000                     | <input type="checkbox"/> \$60 |
| \$25,000                     | <input type="checkbox"/> \$75 |

## Terms & Conditions

This information is intended to provide a brief overview of some of the terms and conditions of the Family Cyber insurance policy. Please read your Policy carefully. Coverage provided by the insurer is subject to actual terms, conditions, exclusions, endorsements, applicable law and/or other terms of the Policy.

This insurance provides cyber coverage on a personal lines basis and excludes any work, professional engagement, or business activities.

This insurance is provided only to the Named Insured (individual) listed on the certificate of insurance and their Family as defined in the policy. Coverage is not afforded for the business, employees or employees' family members of the insured.

This insurance contains a System Maintenance condition that requires:

- Providing and maintaining a license for anti-virus software and ensuring that this software is active and in use on the Insureds Home Computer.
- Performing and installing all available software updates and patches as soon as practicable, either (a) in the instance of a new Home Computer, as soon as possible but in no event more than 48 hours of the Home Computer first being connected to the internet, and (b) in all other instances, in no event more than fifteen days after the updates or patches are made available.
- Providing and running a data backup system at appropriate intervals, including without limitation performing a full backup of the Home Computer at least once per month.
- The Named Insured is required to notify the insurer of any event within 30 days. In the event of a loss or claim, coverage determination will be dependent on the facts and circumstances of the event, the specific language, terms and conditions of the Policy issued and applicable law.
- The Insurer may retain a third party service provider to perform one or more of the services it is obligated to provide under the policies.

## Employment Practices Liability

Do you employ administrative and/or professional staff? Does your business engage independent contractors, volunteers, or students? This insurance is designed for business owners to protect against allegations of employment practice violation, including wrongful termination, discrimination, workplace harassment, and other employment related allegations.

Recommended for business owners with employees, contractors, volunteers or students.

Would you like to purchase Employment Practices Liability?  
If yes, please complete the fields below.

Yes  No

|          | Limit       | Annual Premium                 |
|----------|-------------|--------------------------------|
| Option 1 | \$100,000   | <input type="checkbox"/> \$270 |
| Option 2 | \$250,000   | <input type="checkbox"/> \$373 |
| Option 3 | \$500,000   | <input type="checkbox"/> \$394 |
| Option 4 | \$1,000,000 | <input type="checkbox"/> \$514 |

Total number of employed staff (professionals):

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Total number of administrative staff (including students working under supervision):

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Total number of contracted staff (professionals):

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Has any application for similar insurance ever been denied, cancelled or not renewed by the insurer?  Yes  No

If yes, please provide details.

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Are you aware of any facts, circumstances or situations, which may reasonably give rise to a claim against you/your business?  Yes  No

If yes, please provide details.

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Has there been or are there now pending, any claims against the business, or any past, present directors, officers or employees of the business:

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Involving any employment law?  Yes  No

If yes, please provide details.

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Involving non-employment related discrimination or sexual harassment?  Yes  No

If yes, please provide details.

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During the past 12 months, has the business experienced any change in controlling ownership of the business?  Yes  No

If yes, please provide details.

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## Legal Services Package

Members can access a comprehensive Legal Services Package, which includes:

### Unlimited Legal Helpline

Unlimited access to the Legal Helpline. Helpline Lawyers provide general legal information and assistance for any legal question. Please note: the lawyer will not advise on coverage, make a claim decision, or review documents.

### Legal Document Centre

Unlimited access to an online library of legal documents, all of which have been drafted by lawyers, and are in the form of guided, customizable templates. Examples of templates include wills and power of attorney documents, employment contracts, service agreements, and more. Documents are based on Canadian laws and legal best practices. They can be downloaded and saved securely for future reference or reuse.

### Legal Document Review

Access to lawyers to review a simple legal document and provide you with an annotated copy of the document with their notes. This will assist you in understanding the general impacts that the document may have for you.

### Simple Legal Letter Drafting

Access to lawyers who will draft a simple legal letter for you to send. This service is intended to assist you with drafting simple documents, such as a demand letter, a complaint letter, a travel consent letter for a child, a resignation letter, or a warning letter to an employee.

### Emotional Support Assistance

Access to Emotional Support Assistance through which you can confidentially speak with a professional counsellor about any work or personal issues which may be affecting you.

### Identity Theft Protection Assistance

Identity theft experts will provide you with general assistance and prevention tips about identity theft and how to protect yourself. If you believe you have been the victim of identity theft, this service can also provide you with direct assistance by an Identity Restoration Expert to help restore your identity.

### HR Assistance

Access to HR Assistance where you can speak to a Human Resources professional, who can provide you with information regarding HR issues that are impacting your business.

### Annual Cost \$39

Would you like to purchase the Legal Services Package?

Yes  No

**Note, if you are purchasing Legal Expense insurance, some elements of the Legal Services Package are automatically included in the Personal and Business Legal Solutions.**

## Legal Expense Insurance

Personal and/or business-related legal matters can arise at any time and can be costly.

**Personal Legal Solutions** provides:

- Legal Services Package (as detailed above, however HR Assistance not included)
- Insurance to cover the legal costs and expenses for resolving a range of disputes, including:
  - Pursuing or defending legal action relating to the selling or buying of goods or obtaining services. Plus, coverage for disputes with a leasing company for the amount due if a leased motor vehicle is declared a total loss by the auto insurer;
  - Pursuing or defending a dispute relating to a residential tenancy agreement you entered into to rent their principal residence (90 day waiting period applies from the inception of the first policy held);
  - Defending against the revocation or suspension of your motor vehicle driver's licence;
  - Defending against a criminal investigation or prosecution arising from your work as an employee, or prosecution for a highway traffic or motor vehicle offence;
  - Pursuing legal action relating to a trespass, legal nuisance or if a third party causes physical damage to personal property;
  - Pursuing legal action due to an accident that causes death, illness, or a serious injury;
  - Responding to a tax audit or appealing a Canada Revenue Agency (CRA) decision.

| Each claim/aggregate limit | Premium                        |
|----------------------------|--------------------------------|
| \$25,000/\$125,000         | <input type="checkbox"/> \$99  |
| \$50,000/\$250,000         | <input type="checkbox"/> \$115 |

Would you like to purchase Personal Legal Solutions?  Yes  No  
 If yes, please answer the questions below:

In the last 3 years, have you, your spouse, or any adult children living in your home:

- Pursued a consumer contract dispute?  Yes  No
- Pursued a dispute with a neighbour or had to take action following a legal nuisance or trespass on your land?  Yes  No
- Pursued legal action against a negligent third party following an injury to yourself?  Yes  No
- Pursued legal action against a medical practitioner following an incident of clinical negligence which caused you an injury?  Yes  No
- Been audited by the CRA?  Yes  No
- Been interviewed by the police or arrested in connection with an alleged criminal offence?  Yes  No
- Been sued for alleged discrimination?  Yes  No
- Been the victim of identity theft?  Yes  No

If yes, please provide details:

**Business Legal Solutions** provides:

- Legal Services Package (as detailed above, however Identity Theft Protection Assistance not included)
- Insurance to cover the legal costs and expenses for resolving a range of disputes, including:
  - Defending against a criminal or occupational health and safety investigation or prosecution;
  - Defending against proceedings brought against an employee for unlawful discrimination;
  - Defending against a prosecution for a highway traffic or motor vehicle offence;
  - Pursuing or defending legal action for disputes relating to the selling or buying of goods and providing or obtaining services. Plus, recovery of money owed in the delivery of goods or services and disputes for premises rented by a business to conduct their operations within (90 day waiting period applies from the inception of the first policy held);
  - Defending against the revocation, suspension, or non-renewal of an operating or business licence;
  - Pursuing legal action relating to a trespass, legal nuisance or if a third party causes physical damage to business property;
  - Pursuing legal action due to a work-related injury while away from the business premises;
  - Responding to a tax audit or appealing a Canada Revenue Agency (CRA) decision.

**\$50,000 per claim / \$250,000 aggregate**  
**Nil deductible**

| Estimated Revenue for the next 12 months | Premium                                    |
|--|--|
| \$0 to \$150,000                         | <input type="checkbox"/> \$160             |
| \$150,001 to \$250,000                   | <input type="checkbox"/> \$253             |
| \$250,001 to \$500,000                   | <input type="checkbox"/> \$412             |
| \$500,001 to \$1,000,000                 | <input type="checkbox"/> \$528             |
| \$1,000,001 to \$2,000,000               | <input type="checkbox"/> \$930             |
| \$2,000,001 to \$3,000,000               | <input type="checkbox"/> \$1,348           |
| \$3,000,001 +                            | <input type="checkbox"/> Referral Required |

Would you like to purchase Business Legal Solutions?  Yes  No  
 If yes, please answer the questions below:

Total number of employees (full time & part time):

In the last 3 years has your business, you or any employee, director or partner of the business been:

- Subject to a tax audit?  Yes  No
- Involved in a dispute regarding compliance with GST, Income Tax, PST or HST or payroll tax deductions?  Yes  No
- Involved in any dispute regarding any damage, trespass or nuisance in relation to property that you are responsible for?  Yes  No
- Prosecuted in a criminal court (excluding vehicle-related offences)?  Yes  No
- Subject to a civil action alleging theft or breach of privacy?  Yes  No
- The recipient of a notice to alter, suspend, revoke or refusal to renew any statutory licence?  Yes  No
- Involved in any contractual dispute?  Yes  No

If yes, please provide details:

Have you pursued an undisputed debt in the last 12 months, after you had exhausted your normal aged receivable procedures?  Yes  No  
 If yes, please provide details.

## 24 Hour Accident Coverage (not available for QC members)

This coverage is designed to provide you and your loved ones with financial assistance in the event of an accident that results in injury or death.

### 24 Hour Accident Insurance provides a lump sum benefit where:

- A loss or death occurs due to an Accident, and
- Where, as the result of accidental injury, the disablement results in a permanent total disability.

### The policy also provides coverage for:

- Repatriation costs, and
- Rehabilitation (training) costs should you require special training in order to be qualified to engage in a different occupation following an insured accident.

Would you like to purchase the 24 Hour Accident Insurance?  Yes  No

If yes, please complete the fields below.

| Coverage Overview                         | \$25,000 Limit                       | \$50,000 Limit                       |
|---|--------------------------------------|--------------------------------------|
| Accidental Death and Dismemberment (AD&D) | <b>\$25,000</b>                      | <b>\$50,000</b>                      |
| Permanent Total Disability (PTD)          | <b>\$25,000</b>                      | <b>\$50,000</b>                      |
| Repatriation                              | \$5,000                              | \$5,000                              |
| Rehabilitation                            | \$5,000                              | \$5,000                              |
| Fracture Benefit                          | \$2,000                              | \$2,000                              |
| Dental Injury                             | \$500                                | \$500                                |
| Accidental Medical                        | \$5,000                              | \$5,000                              |
| <b>Annual Cost</b>                        | <input type="checkbox"/> <b>\$53</b> | <input type="checkbox"/> <b>\$81</b> |

In order to purchase the 24 Hour Accident Insurance coverage you must be under the age of seventy (70).

Please confirm your date of birth:

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## Critical Illness Insurance (not available for QC members)

This insurance helps to cover costs associated with a critical illness such as cancer, a heart attack or stroke. If you are diagnosed with one of 30 covered conditions, the policy provides a tax-free lump-sum payment of up to \$50,000 that you can use for anything you need. This gives you the flexibility to focus on your health and well-being without worrying about financial burdens.

### Covered Conditions include:

- Alzheimer's disease / pre-senile dementia
- Benign brain tumour
- Cancer
- Heart attack
- Kidney failure
- Motor neuron disease
- Multiple sclerosis
- Open-heart surgery
- Parkinson's disease
- Stroke
- Third degree burns
- Blindness
- Deafness

Would you like BMS to contact you about additional information on this product?

Yes  No

## NEW! Legal Expense for Insurance Audits

Do you work with clients who access coverage for your professional services under their extended health benefits plan? If yes, you may want to consider securing Legal Expense for Insurance Audits.

Even the most diligent professional can be faced with an investigation, inquiry, or audit from an insurance company or benefit provider.

Access up to \$25,000 per claim and \$125,000 annual aggregate to cover the legal costs associated with having to respond to an investigation, inquiry or audit from an insurance company or benefit provider in relation to your professional services.

**Annual Cost: \$45**

Would you like to purchase Legal Expense for Insurance Audits?

Yes  No

## Declarations & Warranty

The undersigned declares:

I declare that during the last five years no insurer has cancelled, declined or refused to issue me/us any form of liability insurance and that this application discloses the hazards known to exist at the date of this application. I declare that the statements made herein are in every respect true and correct and hereby apply for a contract of insurance to be based upon the truth of the said statements.

Submitting this form does not bind the Applicant or company to complete the insurance but is agreed that this form shall be the basis of the contract should a policy be issued.

The insurance premium is fully retained and not refundable.

It is understood and agreed that I/we authorize (BMS) to arrange for the insurance application, communication and policy documentation (immediate and future) to be in the English language at our express consent. This authorization shall not affect the Terms and Conditions set out in the Policy(ies).

Signed by:

Position:

Date:

## Fee Disclosure

| Line of Coverage                      | Premium         | Commission (included within premium) | Fee |
|---------------------------------------|-----------------|--------------------------------------|-----|
| Business Professional Liability       | Per application | 17.5%                                | \$5 |
| Business Commercial General Liability | Per application | 17.5%                                | \$5 |

|  |                 |       |                                      |
|--|-----------------|-------|--------------------------------------|
| Contents, Crime, and Business Interruption                 | Per application | 20%   | \$20                                 |
| Cyber Security & Privacy Liability                         | Per application | 25%   | Nil                                  |
| Personal & Family Cyber Protection<br>\$10,000<br>\$25,000 | Per application | 22.5% | \$10.08 / \$9.45<br>\$10.86 / \$9.45 |
| Employment Practices Liability                             | Per application | 25%   | Nil                                  |
| Personal Legal Expense                                     | Per application | 20%   | Nil                                  |
| Business Legal Expense                                     | Per application | 20%   | Nil                                  |
| 24 Hour Accident Insurance                                 | Per application | 15%   | \$21                                 |
| Legal Expense for Insurance Audits                         | Per application | 20%   | \$15                                 |

For more information on broker compensation please click [here](#).

## Payment Information

Applicable taxes will be added where required. All cheques payable to BMS Canada Risk Services Ltd, or complete credit card authorization below.

|                |         |
|----------------|---------|
| Sub-total      | \$      |
| Service Fee    | \$25.00 |
| Tax            | \$      |
| Total Enclosed | \$      |

## Authorization for Credit Card Charge

VISA, AMEX or M/C Account No:

Expiry Date:

CVV:

Cardholder Name:

Signature:

**BMS Canada Risk Services Ltd. (BMS)**  
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