



HENDRY SWINTON MCKENZIE
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OIL TANK QUESTIONNAIRE

DATE:

NAME OF INSURED:

RISK ADDRESS:

Is there an oil tank located at the above insured premises? No_____ Yes_____

If No, what type of heating system is in use?_____

IF YES:

Is the oil tank heating Primary_____ Auxiliary_____

If auxiliary, what type of primary heating system is used?_____

Age of the oil tank _____

Is the oil tank serviced yearly? No_____ Yes_____

If No, date of the last servicing. _____

Oil tank construction_____

Location of the oil tank:

Inside_____ Outside_____ Aboveground_____ Underground_____

If Underground, is it Fully Buried _____ Partially Buried_____

Is the tank on a rigid, non-combustible base? No_____ Yes_____

Is the tank secured with a support strap? No_____ Yes_____

Where is the oil tank filled from? Outside_____ Inside_____

Is the tank CSA or ULC approved? No_____ Yes_____

PLEASE PROVIDE A PHOTOGRAPH OF THE OIL TANK

We appreciate your assistance and co-operation in this review.