SPG Canada

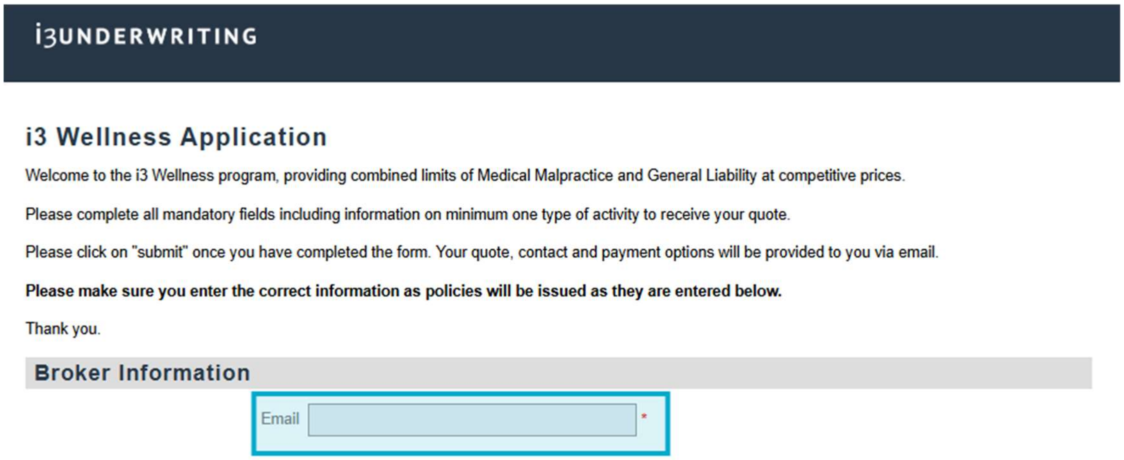
Wellness Portal

Help Guide

THINK BEFORE YOU PRINT

Step One: Enter Broker Email

Enter the email address of the broker to receive the quote.


i3UNDERWRITING

i3 Wellness Application

Welcome to the i3 Wellness program, providing combined limits of Medical Malpractice and General Liability at competitive prices.

Please complete all mandatory fields including information on minimum one type of activity to receive your quote.

Please click on "submit" once you have completed the form. Your quote, contact and payment options will be provided to you via email.

Please make sure you enter the correct information as policies will be issued as they are entered below.

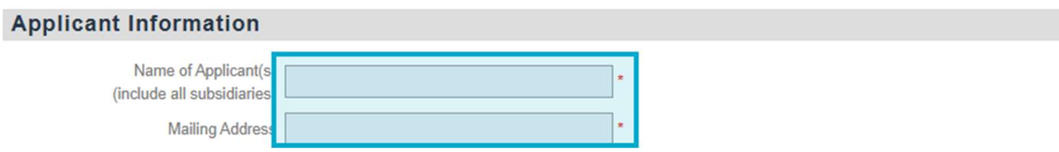
Thank you.

Broker Information

Email *

Step Two: Enter your Client's Information

Under Applicant Information, this is information that pertains to your client (the applicant).

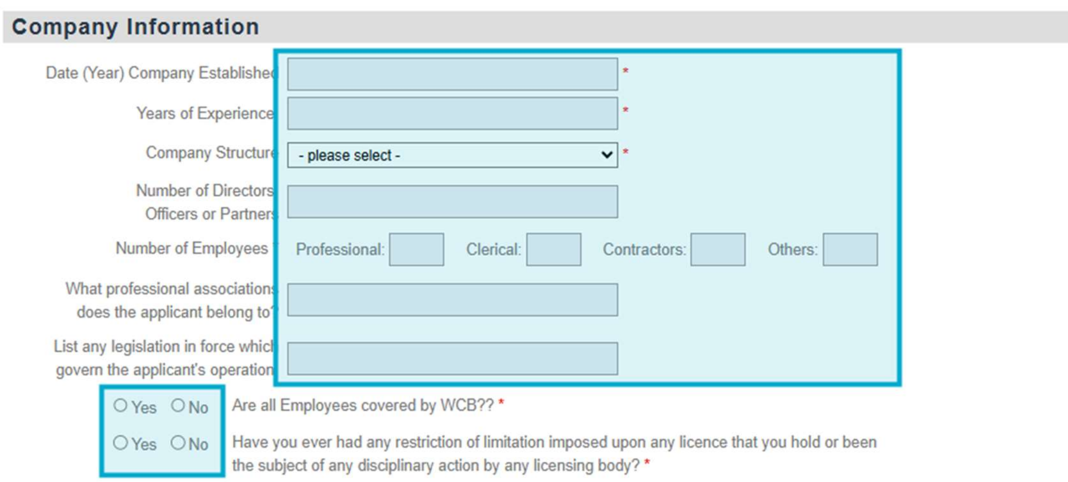

Applicant Information

Name of Applicant(s (include all subsidiaries *

Mailing Address *

Step Three: Enter Applicant's Operations Information

Under Company Information accurately fill out your applicant's operations information.


Company Information

Date (Year) Company Established *

Years of Experience *

Company Structure - please select - *

Number of Directors Officers or Partners

Number of Employees Professional: Clerical: Contractors: Others:

What professional associations does the applicant belong to?

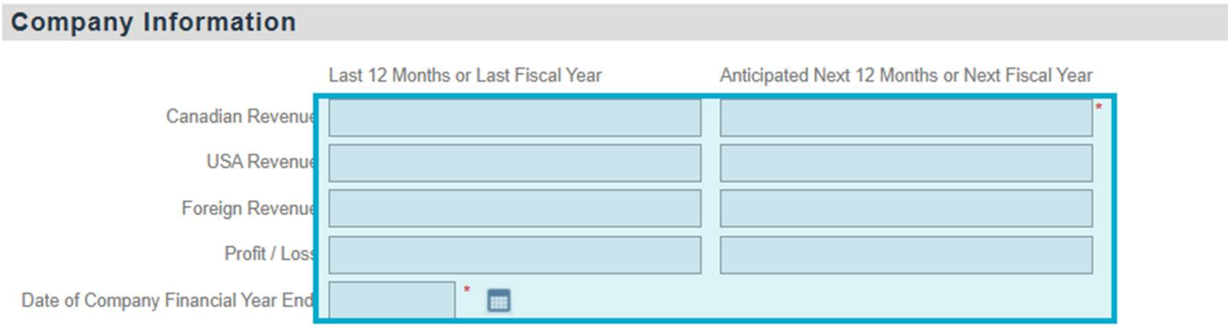
List any legislation in force which govern the applicant's operation

Yes No Are all Employees covered by WCB?? *

Yes No Have you ever had any restriction of limitation imposed upon any licence that you hold or been the subject of any disciplinary action by any licensing body? *

Step Four: Enter Applicant's Gross Revenues

Please fill out all columns that apply as this information is used for rating.



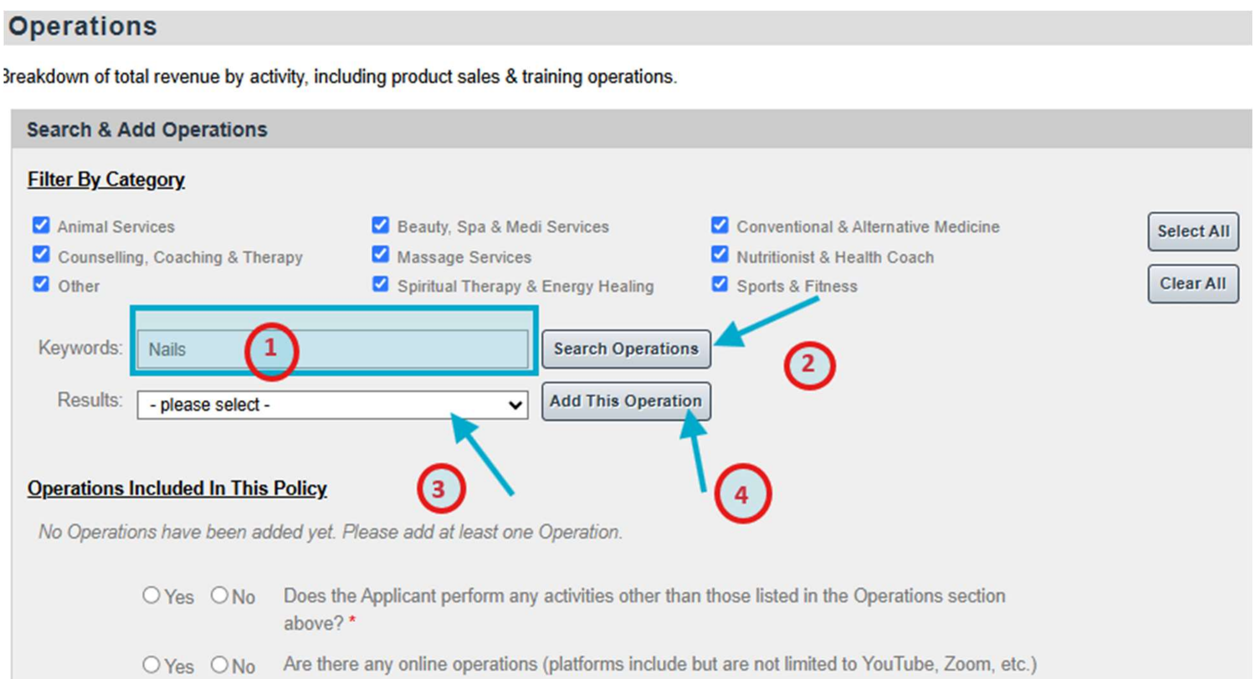
Company Information

Last 12 Months or Last Fiscal Year
Anticipated Next 12 Months or Next Fiscal Year
Canadian Revenue *
USA Revenue
Foreign Revenue
Profit / Loss
Date of Company Financial Year End *

Step Five: Enter Applicant's Operations

1. **Use the Keyword Search as demonstrated below to search for your applicant's operations.**
2. **Click "Search Operations".**
3. **Select the results drop down and find your applicant's operations.**
4. **Click 'Add This Operation'**

Repeat this for *every* operation your client may have.



Operations

Breakdown of total revenue by activity, including product sales & training operations.

Search & Add Operations

Filter By Category

Animal Services
Beauty, Spa & Medi Services
Conventional & Alternative Medicine
Counselling, Coaching & Therapy
Massage Services
Nutritionist & Health Coach
Other
Spiritual Therapy & Energy Healing
Sports & Fitness
Select All
Clear All

Keywords: Nails 1
Search Operations 2
Results: - please select -
Add This Operation
3
4

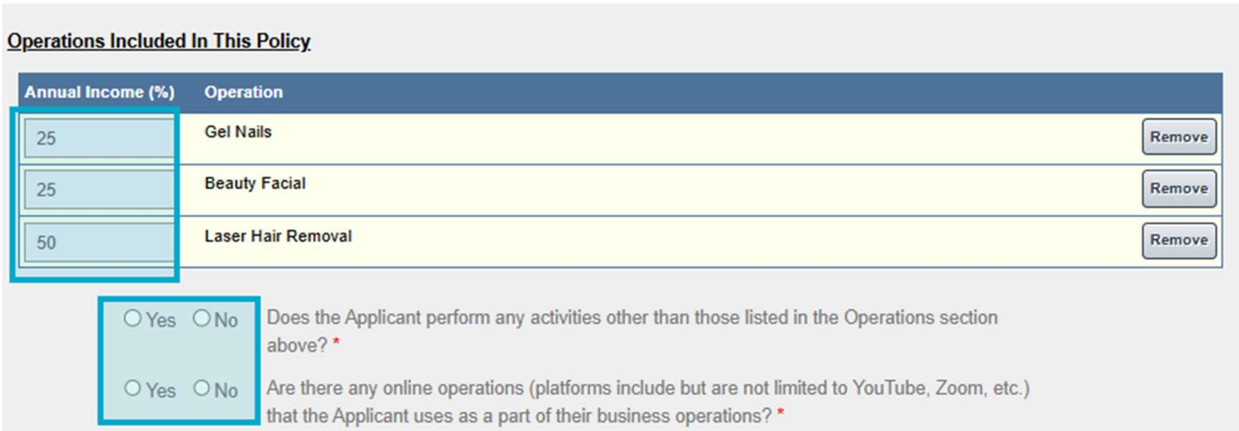
Operations Included In This Policy

No Operations have been added yet. Please add at least one Operation.

Yes No Does the Applicant perform any activities other than those listed in the Operations section above? *

Yes No Are there any online operations (platforms include but are not limited to YouTube, Zoom, etc.)

Your applicant's operations to be included in this policy will appear below. Please enter the values of how much each of your applicant's revenues derive from each activity as per the example below.



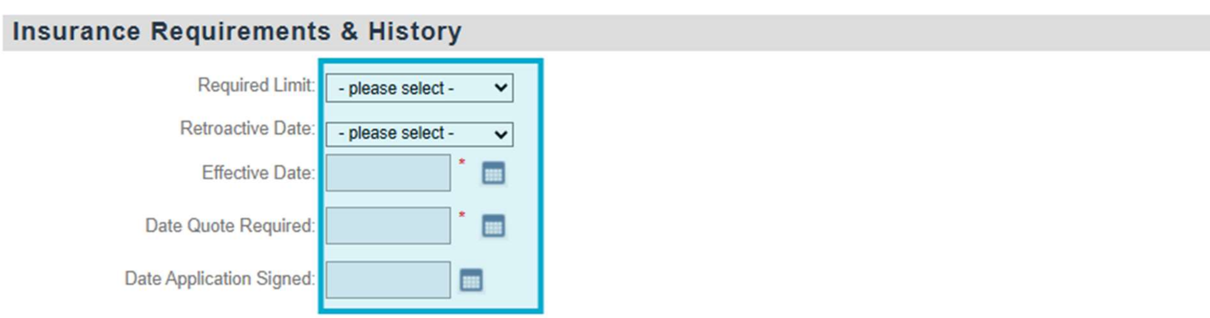
If after carefully reviewing the list you don't see your Applicant's unique operations select "YES" to the first question and enter robust details about the operations.

Step Six: Answer Underwriting Questions

Answer all the 'YES' or 'NO' Questions as they apply by selecting the corresponding radio button including until the bottom of the Claims History section.

Step Seven: Input Insurance Requirements & History

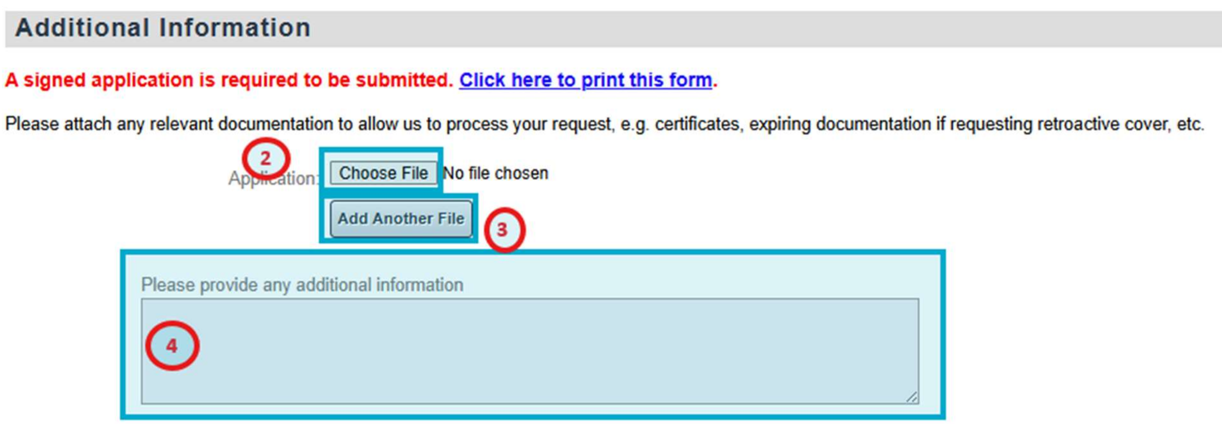
1. Select the required limit (Please note that CGL and Professional Liability have identical limits)
2. Select the Retroactive Date if Applicant possesses Professional Liability.
3. Complete the remainder of this section by inputting the necessary dates.

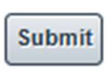


Step Eight: Attach Files and Submit Application

1. Click the link to print off the application for applicant to sign and date. If an unsigned application is submitted a subject to sign and date will be added as a condition of the quote.

2. Click on 'Choose File'; find the saved application per above on your computer.
3. Please upload any other pertinent documents (EX: Expiring Declaration showing Retroactive Date, Marketing Submissions, Applicant's Professional Certificates, Resumes, Loss Runs etc.)
4. If applicable write out any pertinent details such as requested property or Cyber Coverage or anything you would like the Underwriter to know.



Remember to click 

so that your submission gets sent to the Underwriter!

TIPS:
- Remember to save the i3 Wellness Portal link as a favourite on your browser for easy access.
- Any questions? Please email Tracy@i3underwriting.com or call during business hours at (604) 798-1277.
- If you don't see an operation listed, contact Tracy Liable to discuss. Our program is always evolving!