

MINNESOTA JOINT UNDERWRITING ASSOCIATION

SUPPLEMENTAL APPLICATION
FOR CLAIMS-MADE COVERAGE

LANDFILLS

1. Name and address of Applicant

- _____
- _____
- _____

2. Number of years in operation: _____

3. Do you agree that the policy being applied for excludes all pollution-related claims, including clean-up, and all costs associated with closure and post-closure requirements imposed by state or federal regulations? Yes No

4. Do you agree that the policy being applied for excludes coverage for claims arising out of products or completed operations? Yes No

5. Describe the facility's proximity to the nearest residential area.

- _____
- _____
- _____
- _____

6. Is the landfill fenced? Yes No If yes, describe the type of fence.

- _____
- _____
- _____

7. Is the landfill guarded nights and weekends? Yes No

8. Describe any known prior use of the landfill site. _____

- _____
- _____

9. Are loads inspected before being accepted for disposal? Yes No

10. How many acres does the entire landfill site cover? _____

How many acres in active use? _____

11. What are your total annual receipts for garbage, refuse and solid waste collection?

- _____

12. What is your total annual payroll for garbage, refuse and solid waste collection?

- _____

To this application, the following materials must be attached:

A. The most recent inspection report of the MN Pollution Control Agency;

B. An operating/engineering plan that includes the following:

1. a description of materials acceptable and not acceptable for disposal in the facility;
2. procedures and methods for distribution, compacting and covering of disposed material; and
3. methods for preventing the development and accumulation of methane gas; and

C. Copies of any applicable state and local permits.

Applicant's Signature

Date