

# 100% Pass 2026 RIBO-Level-1: Perfect RIBO Level 1 Entry-Level Broker Exam Exam Paper Pdf

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## RIBO Level 1 – Review Questions with complete solution

Non-disclosure - correct answer ✓Withholding facts necessary to underwrite a risk

Independent Adjuster - correct answer ✓Someone who adjusts losses on behalf of the insurance companies, but is not employed by them

Reinsurance - correct answer ✓A form of insurance whereby one insurance company (the reinsurer) in consideration of a premium paid to it, agrees to indemnify another insurance company (the ceding company) for part or all of its liabilities from insurance policies it has issued.

Stock Companies - correct answer ✓owned by shareholders, they are for profit and it comes from underwriting and investment income. The capital comes from shareholders and cannot be assessed

Assessment or Premium Note - correct answer ✓Owned by members/policyholders, not for profit. The capital comes from premium notes (insurance premiums) and assessments. They do not pay dividends and they can be assessed.

Factory Mutual - correct answer ✓Owned by policyholders who are members and they are not for profit. Capital comes from members and policyholders. Does not pay dividends and they can be assessed. Benefit to policyholders is expertise on reducing fire hazards and loss prevention.

Stock Mutual - correct answer ✓Owned by shareholders, not for profit, its a mutual that provides insurance to shareholders. Capital comes from

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### IIC RIBO Level 1 Entry-Level Broker Exam Sample Questions (Q125-Q130):

#### NEW QUESTION # 125

Which of the client situations would prompt you to discuss a change to their habitational policy?

- A. Your client tells you they are using a neighbour's trailer for a few months and will store it in their garage.
- **B. Your client tells you they have moved their office to be entirely in their spare bedroom.**
- C. Your client tells you that they have purchased a boat.
- D. Your client tells you they are going to replace their garden shed.

**Answer: B**

Explanation:

The correct answer is D because operating a home-based business or office from the residence is a material change in the use of the property and should prompt the broker to review whether the current habitational policy still fits the risk. IBC's home insurance rating guide specifically says insurers want to know "Do you operate a home-based business?" as part of assessing the property and setting the policy terms and premium.

That is a direct signal that business use of the home can affect underwriting and coverage.

This also aligns with the general principle that the insured must understand what is and is not included in the policy, and that material misrepresentation or withholding crucial information can make coverage void, voidable, or lead to a denied claim. IBC's Know Your Policy guide explains that if crucial information about the risk is withheld, the insurer may refuse a claim or cancel the policy.

The other options are less directly connected to a change in the occupancy/use of the home itself. A shed replacement may matter for values or outbuildings, and a boat may involve separate watercraft limits, but the most clear trigger to discuss a change to the habitational policy is the client turning part of the home into a dedicated office/business exposure.

#### NEW QUESTION # 126

After the July 1, 2026 auto reforms, which individuals will NOT have access to optional accident benefits under someone else's auto policy?

- A. Drivers listed under the policy.
- B. Spouses listed under the policy.
- C. Dependant children listed under the policy.
- **D. Pedestrians who are not covered by an auto insurance policy.**

**Answer: D**

Explanation:

The correct answer is A. Under Ontario's July 1, 2026 accident benefits reforms, medical, rehabilitation and attendant care benefits remain mandatory, but the other accident benefits became optional. FSRA explains that these optional accident benefits are no longer broadly available through someone else's policy in the old way. Instead, they apply only to a limited group connected to the policyholder.

FSRA's communications material states that, as of July 1, 2026, optional accident benefits coverage will only apply to the named insured, their spouse, and dependants of the named insured and spouse. It also specifically says that pedestrians and cyclists injured in an auto accident will not be covered by optional accident benefits unless they are covered under their own auto insurance policy. That directly makes A the correct answer.

Options B and C are therefore not correct choices, because spouses and dependant children connected to the policy are part of the class that can access optional accident benefits under the policy structure. D is not the best answer in this exam set because the official reform language focuses on the named insured, spouse, and dependants, while the question asks who will not have access under someone else's policy. The clearest excluded group identified by FSRA is uninsured pedestrians.

### NEW QUESTION # 127

A brokerage owned by an insurance company pressures its Brokers to prioritize selling the company's policies, even when other insurers offer better coverage for certain clients. A Broker realizes that a competitor's policy would better suit a client's needs but feels pressured to sell the in-house product instead. What is the Broker's ethical responsibility in this situation?

- A. Avoid discussing competitor policies unless the client specifically asks about them.
- **B. Disclose the conflict of interest to the client and present all suitable options transparently.**
- C. Follow the brokerage's directive and sell the in-house policy to maintain job security.
- D. Convince the client that the in-house policy is the best option, even if it isn't.

**Answer: B**

Explanation:

The correct answer is B. because a broker's primary professional duty is to act in the client's best interest through honest, transparent, and suitable advice, not to let internal sales pressure override proper recommendations. Where there is a potential conflict of interest, the broker must handle it ethically by disclosing the situation and presenting the client with the options that genuinely meet their needs.

A). is incorrect because job security or employer pressure does not excuse giving advice that is not in the client's best interest. C. is also wrong because withholding suitable alternatives simply because the client did not specifically ask undermines the broker's duty to advise competently and fairly. D. is the clearest ethical breach because it involves knowingly misleading the client.

From a RIBO perspective, this question tests the broker's obligations around professionalism, integrity, and conflicts of interest. A broker must provide fair and informed advice, avoid misleading statements, and ensure the client understands the available suitable options. Where ownership, compensation, or internal pressure may influence the recommendation, transparency is essential. Proper conduct means documenting the advice given, explaining why certain options may be more suitable, and allowing the client to make an informed decision without manipulation.

### NEW QUESTION # 128

You meet with a client on July 1st to review a quote home insurance you previously provided to them on June 28th. During your meeting the client accepts the quote and requests that coverage begin on June 28th. What should happen next?

- A. As you met with the client on June 28, you can have coverage begin on this date.
- B. Call your principal broker to obtain approval.
- C. The earliest date you can use is July 1st.
- **D. Call the insurance underwriter to obtain approval.**

**Answer: D**

Explanation:

The correct answer is C. A broker should not unilaterally backdate home insurance coverage simply because a quote was previously discussed or because the client now wants an earlier effective date. A quote is not the same as coverage, and the risk must still be accepted under the insurer's underwriting authority before coverage can properly attach. RIBO's Code of Conduct requires a broker to act only within their competence and authority, and not undertake insurance business in a way that creates unnecessary risk or misleads the client about what coverage is actually in force.

That makes A incorrect: meeting or quoting on June 28 does not itself create insurance coverage. B is not always automatically correct, because an earlier effective date might be possible, but only if the insurer agrees through proper underwriting authority. D is also not the best answer because the issue is not internal brokerage approval alone; the key approval must come from the insurer/underwriter who has authority to accept or decline the requested effective date.

Industry underwriting guidance also explains that a quote is only an estimate until underwriting is completed and the insurer decides whether and on what terms to issue the policy. So if the client wants coverage to start on June 28, the broker must contact the underwriter and obtain approval before confirming any backdated effective date.

### NEW QUESTION # 129

You would be wise to point out which feature when discussing travel health insurance with anyone?

- A. Benefits are payable for elective surgery procedures.
- B. Senior citizen...
- C. Travel health policies do not provide Accidental Death benefits.
- **D. Travel health policies may limit coverage and benefits for sickness or injury which does not relate directly to an emergency.**

**Answer: D**

Explanation:

The correct answer is A because travel health insurance is designed primarily for sudden, unexpected, and emergency medical situations that arise while travelling. A key point a broker should always explain is that these policies often restrict or exclude coverage for non-emergency treatment, follow-up care that can wait until return home, elective or planned treatment, and situations connected to pre-existing conditions unless specifically covered. From a RIBO perspective, this reflects the broker's duty to ensure the client understands the scope, limitations, and exclusions of the product before relying on it.

B is not the best answer because some travel policies may include or offer accidental death and dismemberment benefits, so saying they do not provide such benefits is too absolute. C is incorrect because elective surgery is generally not the purpose of travel emergency medical insurance and is typically excluded.

The essential consumer warning is that travel health insurance is not broad general health insurance; it is emergency-focused protection.

This question tests an important RIBO competency: a broker must clearly explain what the policy is intended to cover and, just as importantly, what it does not cover. Proper disclosure helps clients avoid uninsured losses and unrealistic expectations at claim time.

### NEW QUESTION # 130

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