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## C11 Test NO 1

1a Risk can defined as a chance of loss this could be either been a loss in property or any liability

1b Pure Risk is insurable as there is a chance of loss without profit while speculative risk there is a chance of profits after loss

1c peril are those event that may cause a loss but can also be influenced by hazard as it is a condition that may cause a peril to occur and make the loss more severe

### 1d Identifying and Analyzing exposures

Formulating Options  
Selecting the best techniques  
Selecting the best techniques  
Implementing the risk management agenda  
Monitoring the risk

Describe how insurance work to spread risk

2a VOLUME – this is whereby the premiums that are been paid in the pool has been used to pay for the losses that make occur from few of the members.

Diversity of the type of risk – if there are different types of risk, the more profitable it would be as they may a chance of profit from a loss that can offset other business class at a better profit average.

Diversity of location-

2b five secondary functions of insurance  
Aiding Security  
Aiding credit  
Promoting loss prevention  
Providing capital  
Providing employment

### 2c Types of general insurance

Aviation  
Fire  
Marine  
Cyber  
Crime  
Automobile  
Real property  
Legal expenses

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## IIC Principles and Practice of Insurance Sample Questions (Q80-Q85):

### NEW QUESTION # 80

An insurer's agency or production department is the equivalent of which department in other businesses?

- A. Administration and human resources
- B. Finance and production
- **C. Sales and marketing**
- D. Information technology and business services

**Answer: C**

Explanation:

The agency or production department within an insurance company is responsible for generating new business, managing distribution channels, working with brokers and agents, and promoting the insurer's products. These functions align directly with sales and marketing departments found in other industries. Their goals include increasing premium volume, maintaining relationships with intermediaries, and ensuring the insurer's products reach the marketplace effectively.

Option B is incorrect because finance and production refer to cost control and manufacturing, neither of which parallels insurance distribution. Option C does not align because administration and HR handle internal operations, not customer acquisition. Option D deals with internal systems and support functions, unrelated to the business-production role of generating and selling insurance.

Therefore, the insurer's agency or production department corresponds to A: Sales and marketing.

### NEW QUESTION # 81

George emails his cousin offering to buy her textbooks for \$500. He states that unless she replies "no," they have a deal. Which essential element of a binding contract is missing?

- A. Capacity to contract
- B. Consideration
- C. Legality of object
- **D. Offer and acceptance**

**Answer: D**

Explanation:

For a legally binding contract, there must be offer and acceptance—a clear proposal and a clear, communicated acceptance. In this case, George attempts to treat silence as acceptance. According to contract law, silence cannot constitute acceptance, unless there is a prior agreement between the parties stating otherwise. Because his cousin has not actively communicated acceptance, the contract remains incomplete.

Option A is incorrect—consideration exists (money in exchange for books).

Option B is irrelevant—buying textbooks is legal.

Option C does not apply—George is 18 and has legal capacity in Alberta.

The missing element is acceptance, so the correct answer is D.

### NEW QUESTION # 82

A person applies for fire insurance on their house but fails to mention that in winter they leave the house unoccupied for two months while vacationing. What is this an example of?

- A. Breach of warranty
- B. Negligence
- **C. Non-disclosure**
- D. Discharge of contract

**Answer: C**

Explanation:

Insurance contracts are built on the principle of utmost good faith, meaning applicants must disclose all material facts that could influence the insurer's decision to accept the risk or determine the premium. Failing to mention a material fact—such as the home being unoccupied for long periods—is considered non-disclosure. Unoccupancy increases the risk of vandalism, frozen pipes, fire severity, and delayed emergency response, all of which affect underwriting decisions.

Option A, negligence, refers to failure to act with reasonable care, not failure to disclose.

Option C, breach of warranty, applies only after a policy is in force and a condition guaranteed to be true is violated.

Option D, discharge of contract, refers to cancellation or completion of contractual obligations.

Since the issue arises during the application stage and involves withholding a material fact, the correct classification is non-disclosure.

### NEW QUESTION # 83

A company suffers a \$100,000 property loss at its commercial location. If Insurer X and Insurer Y have policies subject to the same terms and conditions, and there is no deductible, what will each insurer pay based on the information below?

Insurer X insured amount: \$400,000

Insurer Y insured amount: \$100,000

- A. Insurer X pays \$0; Insurer Y pays \$100,000
- B. Insurer X pays \$50,000; Insurer Y pays \$50,000
- C. Insurer X pays \$100,000; Insurer Y pays \$0
- D. **Insurer X pays \$80,000; Insurer Y pays \$20,000**

#### Answer: D

Explanation:

When more than one insurer covers the same property under policies with identical terms, the loss is often shared according to the proportion of insurance each company provides. This is commonly referred to as contribution "pro rata by limits." First, determine the total amount of insurance:

Insurer X: \$400,000

Insurer Y: \$100,000

Total insurance: \$500,000

Next, determine each insurer's percentage of the total:

Insurer X:  $400,000 \div 500,000 = 80\%$

Insurer Y:  $100,000 \div 500,000 = 20\%$

The total loss is \$100,000, so each insurer pays its proportion of the loss:

Insurer X:  $80\% \times \$100,000 = \$80,000$

Insurer Y:  $20\% \times \$100,000 = \$20,000$

There is no deductible to adjust these amounts. Thus, Insurer X pays \$80,000 and Insurer Y pays \$20,000, making Option C correct.

### NEW QUESTION # 84

Which factor could explain poorer performance of renewal clients as opposed to new business clients?

- A. An automated renewal process
- **B. New business clients limit claims in order to keep premiums low**
- C. More strict underwriting criteria for renewal risks
- D. Reinsurance only being available on renewal policies

#### Answer: B

Explanation:

New business clients often want to present themselves as low-risk to secure better premium rates. As a result, they may be cautious about reporting small claims or may practice better loss prevention-at least initially.

This can make new business perform better from a loss-ratio perspective.

However, renewal clients may become less cautious over time or more willing to submit smaller claims once they are already insured. Additionally, insurers sometimes relax underwriting scrutiny on renewals compared to new applications, which can further widen performance differences.

Option A (automated renewals) does not inherently affect claims behaviour.

Option B is incorrect-renewal underwriting is typically less strict, not more.

Option C is false; reinsurance availability does not differ based on new vs. renewal status.

Thus, the factor most likely contributing to poorer renewal performance is D: New business clients limit claims to keep premiums low, improving their initial results relative to renewals.

If you have questions 85 onward, feel free to send them!

## NEW QUESTION # 85

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