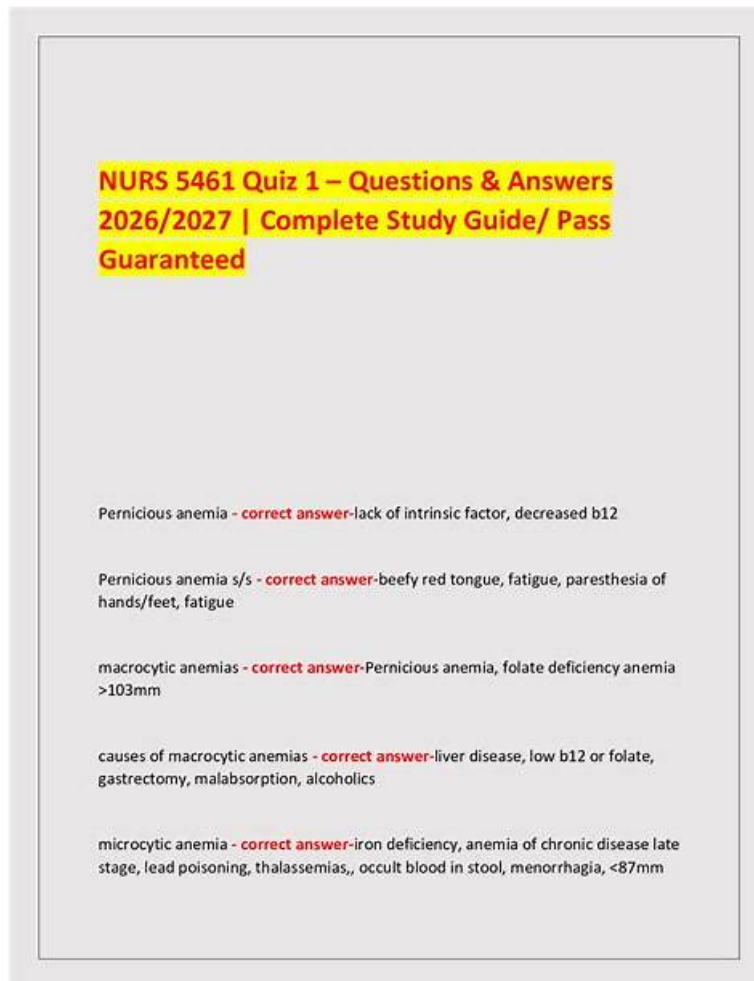


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IIC Principles and Practice of Insurance Sample Questions (Q81-Q86):

NEW QUESTION # 81

Deanna owns a house worth \$1,000,000 but chooses to insure it for \$500,000. What clause might prevent her from being fully reimbursed in the event of a loss?

- A. Subscription
- B. Forfeiture
- C. Contribution
- **D. Coinsurance**

Answer: D

Explanation:

The coinsurance clause requires the insured to carry insurance equal to a specified percentage (commonly 80%, 90%, or 100%) of the property's value. If the insured carries less than the required amount, they become a coinsurer and share in any partial loss. This prevents underinsurance and encourages insureds to maintain adequate coverage levels.

Here, Deanna insures a \$1,000,000 property for only \$500,000-50%. If the policy requires 80% coinsurance, she should be carrying at least \$800,000. Because she does not, she will not be fully reimbursed for partial losses; her payment will be reduced proportionally based on the coinsurance formula.

Option A (forfeiture) applies to breaches of policy conditions. Option C (contribution) applies when multiple insurers cover the same risk. Option D (subscription) applies when several insurers share a single risk by percentage participation.

Thus, the clause that could reduce Deanna's recovery is B: Coinsurance.

NEW QUESTION # 82

Which principle of insurance requires that an insured must have a financial interest in the subject matter of insurance at the time of loss?

- A. Subrogation
- B. Indemnity
- C. Utmost good faith
- **D. Insurable interest**

Answer: D

Explanation:

Comprehensive and Detailed Explanation:

The principle of insurable interest is fundamental to insurance contracts and is essential for the validity of an insurance policy. Insurable interest exists when the insured stands to suffer a financial loss if the insured property is damaged, destroyed, or if the insured person is injured or dies. This principle ensures that insurance contracts are not used for speculation or gambling, which would be contrary to the purpose of insurance.

According to established insurance principles reflected in the Insurance Institute of Canada's Principles and Practice of Insurance, insurable interest must exist at the time of loss for property and liability insurance. For life insurance, insurable interest must exist at the time the policy is taken out. Without insurable interest, an insured would have no legitimate reason to purchase insurance, and the policy could be declared void.

For example, a homeowner has an insurable interest in their house because they would suffer a financial loss if it were damaged by fire. Similarly, a business has an insurable interest in its inventory and equipment. In contrast, a person cannot insure a stranger's property because they would not experience a financial loss if that property were damaged.

This principle protects insurers from moral hazard and ensures that insurance remains a mechanism for risk transfer and financial protection, rather than a means of profit. Therefore, the correct answer is B. Insurable interest.

NEW QUESTION # 83

What is the definition of subrogation?

- A. The right of the insurer to take action against the insured in cases of fraud
- B. A promise by one party to release another from responsibility in exchange for money
- C. The full payout an insurer makes before receiving the deductible
- **D. The process allowing an insurer that paid a claim to recover the amount from the legally responsible party**

Answer: D

Explanation:

Subrogation allows an insurer that has indemnified an insured to pursue recovery from the party legally responsible for the loss. It prevents the insured from collecting twice and shifts the financial burden back to the negligent third party. Subrogation is a fundamental principle tied to indemnity.

Option A describes insurer action in fraud cases-not subrogation.

Option B is incorrect; deductibles are always retained by the insured, not reimbursed later.

Option C describes a release or waiver, not subrogation.

Thus, the correct definition is D.

[Insurance as a Contract - Utmost Good Faith / Material Facts]

NEW QUESTION # 84

Which is a pre-loss objective of risk management for an organization?

- A. Sustained growth
- B. External obligations
- **C. Operational continuity**
- D. Business development

Answer: C

Explanation:

Pre-loss objectives in risk management are goals an organization aims to achieve before any loss occurs. These objectives focus on minimizing the frequency and severity of losses, ensuring preparedness, and maintaining organizational functionality.

Operational continuity is a key pre-loss objective because it emphasizes having systems, controls, and procedures in place to ensure that operations run smoothly-even when risk exposures are present. This includes safety programs, maintenance schedules, compliance measures, and contingency planning.

Operational continuity ensures the business can withstand or avoid disruptions.

Option A (external obligations) is vague and not formally defined as a risk management objective.

Option B (sustained growth) and D (business development) are business goals, not pre-loss risk management objectives.

Thus, the correct answer is C: Operational continuity.

NEW QUESTION # 85

How are staff adjusters and independent adjusters similar?

- A. Neither is allowed to perform an investigation
- B. Neither has any limitation on their authority to settle claims
- C. Both are licensed only in Quebec and New Brunswick
- **D. Both work on behalf of, and are paid by, the insurer**

Answer: D

Explanation:

This question is identical to Question 25, so the correct answer and reasoning are the same. Whether an adjuster is a staff employee or an independent contractor, they are hired to represent the insurer in the claims process. They are both compensated by the insurer- staff adjusters through salary and benefits, independent adjusters through fees or billing arrangements. Both must meet licensing requirements established by provincial regulatory bodies, conduct investigations, and report their findings to the insurer. They are also both subject to authority limits on claim settlement.

Thus, the only option that correctly reflects their similarity is B: both serve and are paid by insurers.

NEW QUESTION # 86

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