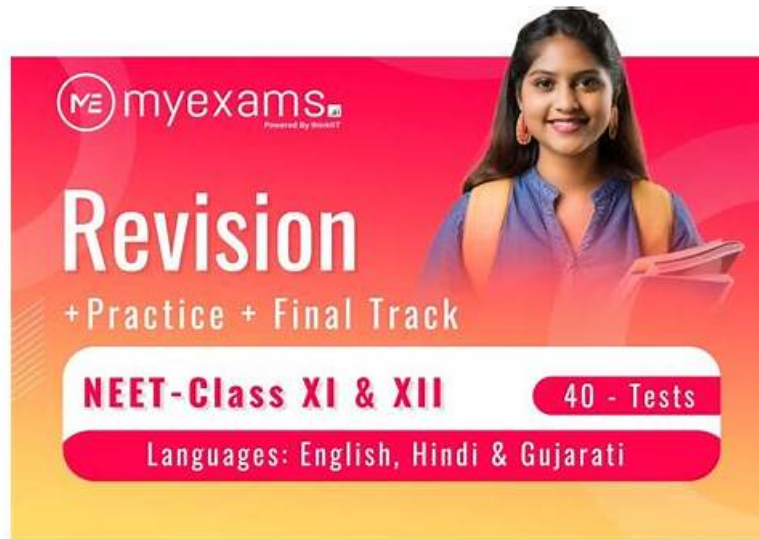


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### IIC Principles and Practice of Insurance Sample Questions (Q42-Q47):

#### NEW QUESTION # 42

Ivana is in an auto accident. The agreed market value of her vehicle is \$17,000.

Her policy deductible is \$1,500.

A wrecking company offers \$3,000 for the salvage.

Ivana chooses to keep the salvage.

What amount will Ivana receive?

- A. \$17,000
- B. \$15,500
- C. \$14,000
- D. \$12,500

Answer: D

Explanation:

Comprehensive Explanation (150-250 words):

When a vehicle is deemed a total loss, the insurer typically pays the actual cash value (ACV) minus the deductible. If the insured decides to keep the salvage, the salvage value must also be deducted from the settlement, because the insured retains something of monetary worth.

The formula for this situation is:

$\text{Settlement} = \text{ACV} - \text{Deductible} - \text{Salvage Value}$

Using Ivana's numbers:

ACV = \$17,000

Deductible = \$1,500

Salvage value = \$3,000

$17,000 - 1,500 - 3,000 = 12,500$  Therefore, Ivana receives \$12,500, and she keeps the damaged vehicle, which she values for personal reasons.

Option B (\$14,000) ignores the salvage deduction.

Option C (\$15,500) ignores the deductible.

Option D (\$17,000) ignores both deductible and salvage, which is not permitted.

The only correct settlement amount is \$12,500.

### NEW QUESTION # 43

MacMan Inc. employs several salespersons who travel throughout Canada with samples of its products.

Which type of coverage does MacMan Inc. require to protect its samples while in the salespersons' possession?

- A. Aviation Insurance
- **B. Commercial Property Floater**
- C. Personal Property Floater
- D. Accident Insurance

**Answer: B**

Explanation:

A commercial property floater is designed for businesses that regularly transport goods, equipment, or samples away from their main premises. In this case, MacMan Inc.'s traveling sales staff carry product samples across Canada. These samples are considered business property, not personal property. Therefore, they must be insured under a commercial floater, which provides coverage regardless of location—hotel rooms, vehicles, trade shows, or customer visits.

Option C, personal property floater, applies to individual property such as jewelry, fine arts, or sporting goods, not business merchandise. Option A, aviation insurance, is irrelevant unless aircraft are owned or used by the business for transport. Option B, accident insurance, covers personal injuries, not physical property.

Because the exposure involves business-owned goods off-premises, the correct coverage is the commercial property floater. It ensures protection against theft, loss, or damage while the goods are in the custody of traveling employees.

### NEW QUESTION # 44

If a dispute arises between the insurer and insured over a claim, which party is responsible for satisfying the courts that a concealment of material facts has occurred?

- **A. Insurer**
- B. Third party
- C. Insured
- D. Broker

**Answer: A**

Explanation:

In insurance law, the insurer bears the burden of proving that the insured failed to disclose a material fact.

Material facts are those that would influence an underwriter's decision to accept, rate, or decline the risk. If an insurer alleges concealment or misrepresentation, the onus lies with the insurer to establish—through underwriting evidence, policy documentation, and testimony—that the fact was material and that nondisclosure affected the insurer's judgment.

Option A is incorrect because the broker is merely an intermediary. Option C is not correct because the insured's role is to answer

questions truthfully, but the legal burden of proof in court rests with the insurer when making the accusation. Option D, a third party, has no role in proving concealment.

Therefore, the insurer must satisfy the court that a material concealment occurred, making B correct.

#### NEW QUESTION # 45

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

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

**Answer: A**

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 # 46

A commercial brokerage failed to advise the insurer of a client's modified risk. The insurer discovered this only at the time of a major loss and denied the claim due to material change. How will the client MOST LIKELY proceed?

- A. Take legal action against the insurer, stating the insurer knew the full risk
- B. Take legal action against the brokerage, stating it had a contractual responsibility to disclose the material change
- C. Pay for the loss, and oblige the brokerage to reimburse the deductible
- D. Pay for the loss, and cancel the policy backdated to before the loss

**Answer: B**

Explanation:

Brokers act as agents of the insured, meaning they owe a professional duty to advise the insurer of any material change in risk. A material change is any alteration that significantly affects the underwriting assessment of the policy. If a broker fails to report such a change, the insurer is legally entitled to void coverage or deny a claim because it was not given full information to properly rate or accept the risk.

When a claim is denied due to the broker's failure—not the insured's intentional nondisclosure—the insured will typically seek compensation by suing the brokerage for negligence. The brokerage has a legal duty of care to ensure proper communication with insurers on behalf of the client.

Options A and B make no sense because the insurer will not voluntarily pay after a justified denial. Option C is unlikely, because the insurer can demonstrate that it never received notification of the change. The correct and realistic recourse is legal action against the brokerage, making D correct.

#### NEW QUESTION # 47

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