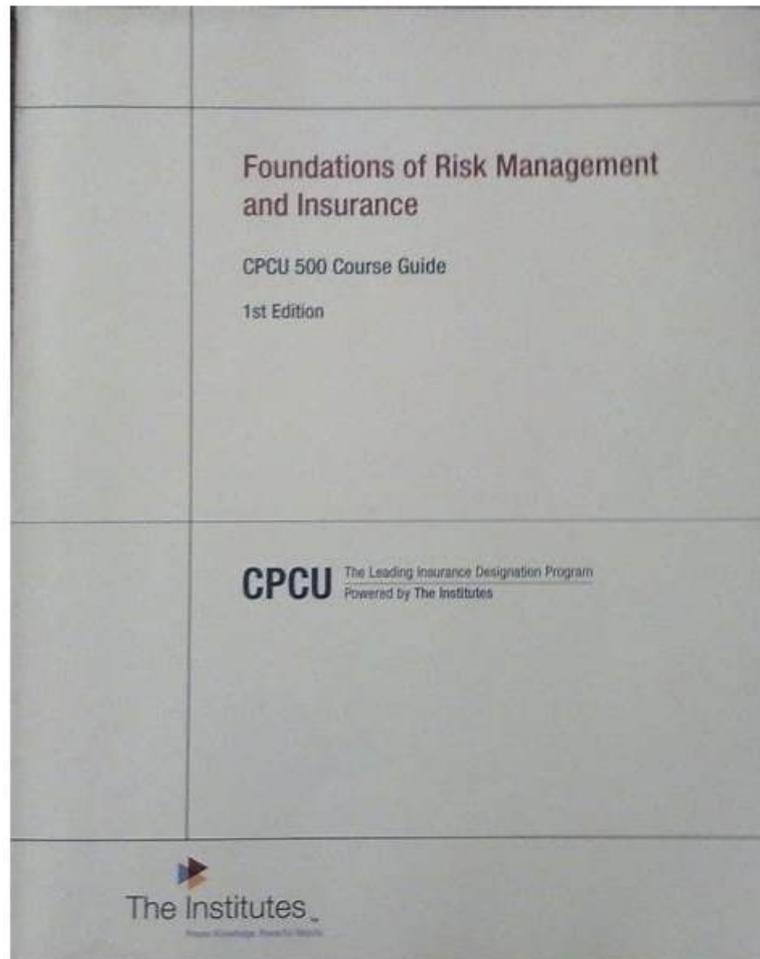


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The Institutes Becoming a Leader in Risk Management and Insurance Sample Questions (Q19-Q24):

NEW QUESTION # 19

Sally recently went to a local nursery to purchase some plants for her yard. She was injured when she tripped over a piece of equipment that a salesperson had left in the aisle after demonstrating it for a customer. From the standpoint of the nursery, this is an example of which one of the following types of liability loss exposure?

- A. Products
- B. Employers liability
- C. Premises and operations
- D. Completed operations

Answer: C

Explanation:

CPCU 500 explains liability loss exposures by focusing on when and where the injury occurs and what activity caused it. Premises and operations liability arises from conditions on the insured's premises or from the insured's ongoing business operations. The key idea is that the alleged negligence is tied to what the business is doing right now, such as maintaining safe walkways, conducting demonstrations, moving inventory, or interacting with customers.

In this scenario, the customer is injured on the nursery's premises after tripping over equipment left in an aisle.

The hazard is a temporary unsafe condition created during normal business activity, and the injury occurs while the nursery is open and operating. That is the classic pattern of premises and operations exposure: a third party bodily injury claim arising from unsafe premises conditions or ongoing operations.

The other options do not fit CPCU 500's definitions. Completed operations involves injury or damage that occurs after the business has finished its work away from the premises or after the work has been completed, such as a contractor's faulty installation causing injury later. Products liability involves injury or damage caused by a product after it has been sold or distributed, typically away from the seller's premises. Employers liability relates to employee injury claims connected to employment, which is not the case here because the injured person is a customer, not an employee.

NEW QUESTION # 20

No-Flame Company installs fire suppressant systems in newly constructed buildings. No-Flame has an occurrence version of the Commercial General Liability Coverage Form. The first day the owners occupied a new building, the fire suppressant system installed by No-Flame malfunctioned. The building owner sustained personal property damage, and the chemicals released by the system caused minor injuries to three of the building owner's employees. No-Flame publicly accused the building owner of setting the suppressant system off in order to collect the insurance proceeds, although No-Flame knew that its systems had defects. The owner sued No-Flame for damages. Which one of the following statements best describes how No-Flame's CGL insurer will respond to the lawsuit?

- A. The insurer will cite the exclusion under Coverage A Bodily Injury and Property Damage Liability that is titled Damage to Impaired Property or Property Not Physically Injured.
- B. The insurer will cite the exclusion under Coverage B Personal and Advertising Injury Liability related to injury arising out of oral or written publication of material done by the insured with knowledge of its falsity.
- C. The insurer will deny the entire lawsuit because the allegations involve both bodily injury and personal and advertising injury.
- D. The insurer will cite the exclusion under Coverage A Bodily Injury and Property Damage Liability that is titled Expected or Intended Injury.

Answer: B

Explanation:

Under CPCU 500 coverage analysis, you separate the lawsuit into the distinct CGL coverage grants and then test exclusions that match the alleged offenses. Here, two different kinds of allegations appear. First, the malfunctioning fire suppressant system caused bodily injury to employees and property damage to the owner's personal property. Those allegations fit Coverage A's basic trigger because they arise from an accidental event, which typically qualifies as an occurrence, and the CGL's duty to defend is broad when allegations potentially fall within Coverage A.

Second, No-Flame publicly accused the owner of intentionally setting off the system to collect insurance proceeds, while knowing its

own system had defects. That allegation is classic defamation-type content (oral or written publication that harms reputation), which is evaluated under Coverage B Personal and Advertising Injury. Coverage B contains a specific exclusion that removes coverage for personal and advertising injury arising out of publication of material done by or at the direction of the insured with knowledge of its falsity.

Because the fact pattern states No-Flame "knew" the accusation was false, the insurer can rely on that exclusion for the defamation component of the suit.

Therefore, the best description is that the insurer will invoke the Coverage B "knowledge of falsity" exclusion for the accusation-related claim, even if it still defends the potentially covered bodily injury and property damage allegations under Coverage A.

NEW QUESTION # 21

Risks that can result in either a loss, no loss, or a gain are known as

- A. Strategic risks.
- **B. Speculative risks.**
- C. Hazard risks.
- D. Pure risks.

Answer: B

Explanation:

CPCU 500 clearly distinguishes between pure risk and speculative risk, which is foundational in Understanding Risk Essentials.

A speculative risk is defined as a situation in which there is a possibility of loss, no loss, or gain. These risks are typically associated with business, investment, or financial decisions where outcomes can move in either direction depending on market forces, management decisions, or economic conditions.

For example, investing in a new product line, purchasing real estate for appreciation, or entering a new market all involve speculative risk because the result could be profit, break-even performance, or financial loss.

Because speculative risks include the possibility of gain, they are generally not insurable in traditional property-casualty insurance. Insurers are primarily designed to handle risks that involve accidental loss, not entrepreneurial or market-driven opportunities for profit.

In contrast, pure risk involves only the possibility of loss or no loss, such as a fire damaging property or an employee being injured in an accident. There is no opportunity for gain from the occurrence of the event itself.

The other options do not fit CPCU 500 definitions. Strategic risk refers to risks arising from business decisions affecting long-term objectives. Hazard risk is not a standard CPCU 500 classification in this context. Therefore, the correct term for risks involving potential gain is speculative risk.

NEW QUESTION # 22

Under the Commercial General Liability Coverage Form written on an occurrence basis, the insuring agreement imposes several conditions on the insurer's duty to pay damages. Which one of the following is such a condition?

- A. The insured must have been held negligent in causing the bodily injury or property damage to require a duty to defend from the insurer.
- B. The bodily injury or property damage must be discovered during the policy period, regardless of when the occurrence took place.
- **C. The occurrence must take place in the coverage territory as defined in the policy.**
- D. Damages must result from bodily injury or property damage as defined by common law.

Answer: C

Explanation:

In CPCU 500, the coverage analysis approach emphasizes reading the policy as a contract: the insuring agreement grants coverage only when its stated conditions are satisfied, and the defined terms control. For an occurrence-based CGL, a core condition in the insuring agreement is that the bodily injury or property damage must be caused by an occurrence and must occur during the policy period, and the occurrence must take place within the policy's defined coverage territory. Option D reflects this exact type of contractual condition: the policy defines where coverage applies, and losses occurring outside that defined territory generally fall outside the insuring agreement unless an exception applies.

Option A is incorrect because CGL coverage hinges on bodily injury and property damage as defined by the policy's definitions section, not by common law. Option B is incorrect because "occurrence" coverage is triggered by when the injury or damage happens, not when it is discovered; discovery language is associated more with claims-made concepts, not occurrence triggers.

Option C is incorrect because the duty to defend is typically determined by the allegations and whether they potentially fall within

coverage, not by a final determination of negligence. The coverage territory requirement is therefore a clear insuring agreement condition.

NEW QUESTION # 23

Ann's Cards and Gift Shop was insured for \$30,000 under a Business Income and Extra Expense Coverage Form with a 70 percent coinsurance clause. Ann estimated her net income and all operating expenses to be \$50,000 for the coming year. A fire at the shop caused damage that took one month to repair. During that month, Ann lost \$2,000 in net income and continuing expenses and incurred \$800 to rent space for temporary operations. How much did Ann's insurer pay for the loss under her Business Income and Extra Expense Coverage Form?

- A. \$2,400
- B. \$2,800
- C. \$1,400
- D. \$800

Answer: A

Explanation:

Under CPCU 500 coverage analysis, Business Income and Extra Expense coverage is subject to both a policy limit and the coinsurance condition. Coinsurance is designed to encourage the insured to carry an amount of insurance that is proportional to the exposure, measured as the expected annual business income value. Here, Ann's annual business income value is given as net income plus operating expenses of \$50,000. With a 70 percent coinsurance requirement, the minimum required limit is $\$50,000 \times 0.70 = \$35,000$.

Ann carried only \$30,000, so she did not meet coinsurance. The coinsurance fraction is the limit carried divided by the limit required: $\$30,000 \div \$35,000 = 0.857142857$. The covered loss consists of two parts during the one-month restoration period: \$2,000 of business income loss plus \$800 of extra expense, for a total of \$2,800. Under the Business Income and Extra Expense form, the coinsurance penalty applies to the amount payable for the covered business income loss and necessary extra expense, subject to the policy limit.

Applying the coinsurance fraction: $\$2,800 \times 0.857142857 = \$2,400$. This amount is below the \$30,000 policy limit, so the insurer pays \$2,400.

NEW QUESTION # 24

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