## THIS CERTIFICATE OF INSURANCE IS TO CERTIFY TO: TORONTO AND REGION CONSERVATION AUTHORITY 5 SHOREHAM DRIVE, DOWNSVIEW, ONTARIO M3N1S4



That Policy(ies) of Insurance as herein described have been issued to the insured named below and are in force on the indicated dates.

CERTIFICATE TYPE:		Blanket	agreements with Toronto and Region Conservation Authority and/or for operations conducted on Toronto and Region Conservation Authority property or facilities.							
(Please Check)		Project/ Service Specific	Toronto and Region Conservation Authority File No. and/or Description:							
Named Insured either an individual			y(ies) to contract and (ies):	d is/are	Address:					
TYPE OF INSURANCE		NCE	INSURER(S)	POLICY NUMBER (S)		ECTIVE/ mm/yy	EXPIRY dd/mm/yyyy	LIMIT OF LIABILITY	DEDUCTIBLE (S)	
Commercial General Liability (occurrence form)		,						Per Occurrence:	\$	
☐ Non-owned Auto Liability ☐ Employer's Liability								Product and Completed Operations Aggregate: \$	\$	
☐ Sudden and Accidental Pollution		tion						Sudden and Accidental Pollution Limit: \$	\$	
								General Aggregate:	\$	
								Employer's Liability: \$	\$	
Automobile Liab	ility							Limit \$	\$	
Umbrella or Excess Liability State Underlying Policy(ies):								Per Occurrence: \$ Annual Aggregate: \$	\$	
Other:								Limit \$	\$	
Other:								Limit \$	\$	
Other:								Limit \$	\$	
Provisions of amend	ments c	or endorsei	nents of listed Poli	cv(ies).						

- 1. Commercial General Liability is extended to include Products and Completed Operations, Property Damage, Personal Injury, Contractual Liability, Owners and Contractors Protective Liability, Contingent Employer's Liability, Cross Liability, Cross Liability, Severability of Interest, Non-Owned Automobile Liability, Tenants Legal Liability, and Sudden and Accidental Pollution Liability. Employees and Volunteers are automatically added as Named Insured.
- 2. Toronto and Region Conservation Authority, its directors, officers, employees, servants and agents have been added as Additional Insureds to the above Commercial General Liability, Umbrella and Excess Liability Policies with respect to liability arising out of the operations of the Named Insured for which a contract is issued by Toronto and Region Conservation Authority, and is not limited to vicarious liability for the Named Insured.
- 3. The following parties are also added as Additional Insureds:
- 4. Any deductible or self-insured retention (SIR) arranged between the Named Insured and the Insurer must be declared herein. Losses and/or claims arising out of the above referenced operations that fall within the deductible or SIR limit are the sole responsibility of the Named Insured.
- 5. If the insurance provided under the said policy(ies) is cancelled or materially changed to reduce coverage or limits as set out in this certificate during the period of coverage stated in this Certificate, the Insurer will give thirty (30) days prior written notice by registered mail of such a cancellation or change to:

## a. Toronto and Region Conservation Authority, Attention: Risk Management, 5 Shoreham Dr, North York, ON MSN 1S4

- 6. The policy(ies) identified above protect each insured in the same manner and to the same extent as though a separate policy has been issued to each, but nothing shall operate to increase the Limits of Liability as identified above beyond the amount or amounts for which the Insurer would be liable if there had been only one Insured.
- 7. The policy(ies) identified above apply as primary insurance and not excess to any other insurance available to the Additional Insured.

## CERTIFICATION

The undersigned certifies the undersigned has reviewed the policy(ies) of insurance described above and further certifies that the policy(ies) has been issued and that the insurance is in effect as stated in this certificate and complies with the insurance requirements of the governing contract, agreement, permit, lease, license or other requirement of Toronto and Region Conservation Authority and that the undersigned has authorization to issue this certificate for and on behalf of the Insurer(s). This certificate is valid until the expiration date(s) shown unless notice is given in writing in accordance with item 5.

DATE:	NAME & ADDRESS OF INSURANCE COMPANY(IES):	
Broker Name		
Tel. No:		
E-mail Contact &		
Address:		SIGNATURE AND STAMP OF CERTIFYING OFFICIAL