

CERTIFICATE OF LIABILITY INSURANCE

This certificate is issued as a matter of information only and confers no rights upon the certificate holder and imposes no liability on the insurer. This certificate does not amend, extend or alter the coverage afforded by the policies below.

1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS To Whom It May Concern <div style="display: flex; justify-content: space-between;"> <div>POSTAL CODE</div> <div>Norwich</div> <div>ON</div> <div>POSTAL CODE N0J 1P0</div> </div>	2. INSURED'S FULL NAME AND MAILING ADDRESS Norwich Brick & Tile Limited 345517 Quaker Street
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3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)

Trucking Company
 Re: Certificate of Insurance
 OPCF 27B - Business operations - Liability for damage to Non-owned automobile(s) in your care, custody or control

4. COVERAGES

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated notwithstanding any requirements, terms or conditions of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described herein is subject to all terms, exclusions and conditions of such policies.

LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

TYPE OF INSURANCE	INSURANCE COMPANY AND POLICY NUMBER	EFFECTIVE DATE YYYY/MM/DD	EXPIRY DATE YYYY/MM/DD	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)		
				COVERAGE	DED.	AMOUNT OF INSURANCE
COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE OR <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input checked="" type="checkbox"/> EMPLOYER'S LIABILITY <input checked="" type="checkbox"/> CROSS LIABILITY <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION <input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES	The Guarantee Company of North America 5000082	2018/05/30	2019/05/30	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE	5,000	5,000,000
				- EACH OCCURRENCE	5,000	5,000,000
				PRODUCTS AND COMPLETED OPERATIONS AGGREGATE	5,000	5,000,000
				<input type="checkbox"/> PERSONAL INJURY LIABILITY OR <input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY	5,000	5,000,000
				MEDICAL PAYMENTS		25,000
				TENANTS LEGAL LIABILITY		100,000
				POLLUTION LIABILITY EXTENSION		
				NON OWNED AUTOMOBILE		5,000,000
				BODILY INJURY AND PROPERTY DAMAGE COMBINED		5,000,000
				BODILY INJURY (PER PERSON)		
AUTOMOBILE LIABILITY <input type="checkbox"/> DESCRIBED AUTOMOBILES <input checked="" type="checkbox"/> ALL OWNED AUTOMOBILES <input checked="" type="checkbox"/> LEASED AUTOMOBILES ** <small>** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE</small>	The Guarantee Company of North America 5000082	2018/05/30	2019/05/30	BODILY INJURY (PER ACCIDENT)		
				PROPERTY DAMAGE		
				EACH OCCURRENCE		
				AGGREGATE		
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>				Any One Vehicle	10,000	750,000
				Catastrophe Limit	10,000	750,000
OTHER LIABILITY (SPECIFY) <input checked="" type="checkbox"/> Motor Truck Cargo <input checked="" type="checkbox"/> Motor Truck Cargo <input type="checkbox"/>	The Guarantee Company of North America 5000082	2018/05/30	2019/05/30			

5. CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the Issuing company will endeavor to mail 15 days written notice to the certificate holder named above, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS Arthur J. Gallagher Canada Limited 250 York Street, Suite 400 London ON POSTAL CODE N6A 6K2	7. ADDITIONAL INSURED NAME AND MAILING ADDRESS (but only with respect to the operations of the Named Insured) POSTAL CODE
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8. CERTIFICATE AUTHORIZATION ISSUER Arthur J. Gallagher Canada Limited AUTHORIZED REPRESENTATIVE Rob Dempsey, HBA CIP	CONTACT NUMBER(S) TYPE Phone NO. 519-646-5800 TYPE NO. TYPE Fax NO. 519-646-5812 TYPE NO. SIGNATURE OF AUTHORIZED REPRESENTATIVE DATE 2018/05/23 EMAIL ADDRESS Jennife_Zoet@aig.com
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