

# CERTIFICATE OF INSURANCE

## TO BE COMPLETED BY YOUR INSURANCE AGENT

**This is to certify to the EDMONTON EXPO CENTRE that the insurance policies shown below are in effect (only this form will be accepted)**

Named Insured \_\_\_\_\_

Agent/Broker \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

**Description of Named Insured's Operations** to which this Certificate applies:

\_\_\_\_\_

### SCHEDULE OF COVERAGE

**Limit Required:**     \$2,000,000     \$5,000,000     \$10,000,000     \_\_\_\_\_

	Insurer	Policy Number	Effective Date	Expiry Date
A. General Liability	_____	_____	_____	_____
B. Automobile Liability	_____	_____	_____	_____
C. Excess / Umbrella Liability	_____	_____	_____	_____

### PARTICULARS OF COVERAGE

(describe by indicating applicable coverage features and amount of insurance)

#### A. General Liability

- Occurrence Form
- Claims Made Form
- Products & Completed Operations
- Independent Contractors
- Broad Form Property Damage
- Occurrence Property Damage
- Blanket Contractual Liability
- All Risks Tenants Legal Liability

- Non-Owned Automobile Liability
- Liquor Liability
- Personal Injury
- Employees As Additional Insureds
- Employers Liability
- Contingent Employers Liability
- Medical Payments
- Cross Liability

Deductible or Retention Level \$ \_\_\_\_\_

#### LIMITS OF LIABILITY

- \$5,000,000    Inclusive Limit
- \$5,000,000    Aggregate each policy period(if applicable)
- \$5,000,000    Aggregate for Products/Completed Operations
- \$ \_\_\_\_\_    Inclusive Limit
- \$ \_\_\_\_\_    Excess of General Liability Coverage Shown Above
- \$ \_\_\_\_\_    Excess of Automobile Liability Coverage Shown Above

#### B. Automobile Liability

#### C. Umbrella/ Excess Liability

- ( ) Follows form of Primary General Liability
- ( ) SPF7 - Excess Automobile Liability

**The Undersigned hereby represents to the Edmonton EXPO Centre that the above policies are accurately described and have been issued to the Named Insured.**

**The Undersigned further represents that these policies are endorsed to provide the Edmonton EXPO Centre with thirty (30) days written notice of cancellation or material change in coverage.**

**The Edmonton EXPO Centre and the City of Edmonton are added as Additional Insured to the policy but only arising out of the Named Insured's operations.**

This certificate is executed and signed by the Insurer or authorized Agent/ Broker of the Named Insured.

\_\_\_\_\_  
Authorized Representative (signature)

\_\_\_\_\_  
Insurance Company or Agent/Broker

\_\_\_\_\_  
Name of Representative (please print)

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Date