



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

Everest Transportation Inc.
12050 Airport Road
Caledon, ON
POSTAL CODE L7C 2W1

2. INSURED'S FULL NAME AND MAILING ADDRESS

Everest Transportation Inc.
12050 Airport Road
Caledon, ON
POSTAL CODE L7C 2W1

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with request to the operations of the Named Insured)

Truckmen/Common Carrier. All Perils Deductible - \$10,000. OPCF5, OPCF8 - \$10,000 Property Damage Reimbursement Deductible. OPCF21B, OPCF23A, OPCF40. OPCF 27B (\$125,000 Limit with \$10,000 Deductible – Applicable to Tractors & Trailers), OPCF 38 - Limit \$15,000.

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, term or condition 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 INSURANCE (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 type="checkbox"/> PRODUCTS AND/OR COMPLETED OPERATIONS <input type="checkbox"/> EMPLOYER'S LIABILITY <input checked="" type="checkbox"/> CROSS LIABILITY <input type="checkbox"/> WAIVER OF SUBROGATION <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION	Northbridge General Insurance Corporation, #2026758	2017/07/18	2018/07/18	COMMERCIAL GENERAL LIABILITY		
				BODILY INJURY AND PROPERTY DAMAGE LIABILITY		
				- GENERAL AGGREGATE		\$2,000,000
				- EACH OCCURRENCE	\$5,000	\$2,000,000
				<input type="checkbox"/> PERSONAL INJURY OR <input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY	\$5,000	\$2,000,000
				MEDICAL PAYMENTS		\$10,000
				TENANTS LEGAL LIABILITY	\$1,000	\$100,000
<input type="checkbox"/> POLLUTION LIABILITY EXTENSION						
<input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES	Northbridge General Insurance Corporation, #2026758	2017/07/18	2018/07/18	NON OWNED AUTOMOBILE		\$2,000,000
<input type="checkbox"/> HIRED AUTOMOBILES				HIRED AUTOMOBILES		
AUTOMOBILE LIABILITY <input type="checkbox"/> DESCRIBED AUTOMOBILES <input checked="" type="checkbox"/> ALL OWNED AUTOMOBILES <input checked="" type="checkbox"/> LEASED AUTOMOBILES ** ** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE	Northbridge General Insurance Corporation, #2026758	2017/07/18	2018/07/18	BODILY INJURY AND PROPERTY DAMAGE COMBINED		\$2,000,000
				BODILY INJURY (PER PERSON)		
				BODILY INJURY (PER ACCIDENT)		
				PROPERTY DAMAGE	\$10,000	
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>				EACH OCCURRENCE		
				AGGREGATE		
OTHER LIABILITY (SPECIFY) <input checked="" type="checkbox"/> MOTOR TRUCK CARGO	Northbridge General Insurance Corporation, #2026758	2017/07/18	2018/07/18	Motor Truck Cargo – Max per Vehicle	\$10,000	\$500,000
				Terminal Location	\$10,000	\$500,000
				Catastrophe Limit	\$10,000	\$500,000

5. CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavour to mail 0 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

H.L. Staebler Company Limited
871 Victoria Street North
Kitchener, Ontario
POSTAL CODE N2B 3S4
BROKER CLIENT ID: 047867

7. ADDITIONAL INSURED NAME AND MAILING ADDRESS

(Commercial General Liability - but only with respect to the operations of the Named Insured)
None.

9. CERTIFICATE AUTHORIZATION

ISSUER Staebler Insurance
AUTHORIZED REPRESENTATIVE Jessica Flikkema, RIB(Ont)
SIGNATURE OF AUTHORIZED REPRESENTATIVE

CONTACT INFORMATION
TYPE PHONE NO. 519.743.5221 TYPE FAX NO. 519.743.7464
TYPE NO. TYPE NO.
DATE 02 August 2017 EMAIL ADDRESS commercial@staebler.com