



# 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.

<b>1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS</b>		<b>2. INSURED'S FULL NAME AND MAILING ADDRESS</b>	
Proof of Insurance		Campbell Tree Experts Inc.	
		1257 Barnwell Crescent	
Ottawa	ON	POSTAL CODE	Ottawa Ontario POSTAL CODE K4B 1K4

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

Tree Trimming & Removal

**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				
<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS MADE <b>OR</b> <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 type="checkbox"/> WAIVER OF SUBROGATION  <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION <input type="checkbox"/> <input type="checkbox"/>	Dominion of Canada General Insurance Company - CCP 0308777	2022/02/23	2023/02/23	COMMERCIAL GENERAL LIABILITY	\$1,000	\$5,000,000				
				BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE						
								BODILY INJURY AND PROPERTY DAMAGE LIABILITY - EACH OCCURRENCE		\$5,000,000
								PRODUCTS AND COMPLETED OPERATIONS AGGREGATE		\$5,000,000
								<input type="checkbox"/> PERSONAL INJURY LIABILITY OR		
								<input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY		\$5,000,000
								MEDICAL PAYMENTS		\$2,500
								TENANTS LEGAL LIABILITY	\$1,000	\$250,000
								POLLUTION LIABILITY EXTENSION		
<input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES	Dominion of Canada General	2022/02/23	2023/02/23	NON-OWNED AUTOMOBILES		\$5,000,000				
<input type="checkbox"/> HIRED AUTOMOBILES				HIRED AUTOMOBILES						
<b>AUTOMOBILE LIABILITY</b>	Intact Insurance - 711566927	2022/02/23	2023/02/23	BODILY INJURY AND PROPERTY DAMAGE COMBINED		\$2,000,000				
				BODILY INJURY (PER PERSON)						
				BODILY INJURY (PER ACCIDENT)						
				PROPERTY DAMAGE						
<b>EXCESS LIABILITY</b>				EACH OCCURRENCE						
				AGGREGATE						
<b>OTHER LIABILITY (SPECIFY)</b>										
<input type="checkbox"/>										
<input type="checkbox"/>										

**5. CANCELLATION**

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

<b>6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS</b>		<b>7. ADDITIONAL INSURED NAME AND MAILING ADDRESS</b> (Commercial General Liability- but only with respect to the operations of the Named Insured)	
Gifford Carr Insurance Group (West) 100 Terence Matthews Crescent		None	
Kanata	ON	POSTAL CODE	K2M 1P7
BROKER CLIENT ID: CAMPTRE-01		Ottawa	ON POSTAL CODE

<b>8. CERTIFICATE AUTHORIZATION</b>			
ISSUER	Gifford Carr Insurance Group (West)	CONTACT NUMBER(S)	
AUTHORIZED REPRESENTATIVE	Crystal Morin	TYPE Main	NO. (613) 596-9101
		TYPE Fax	NO. (613) 596-6808
		TYPE	NO.
SIGNATURE OF AUTHORIZED REPRESENTATIVE		DATE	February 23, 2022
		EMAIL ADDRESS	CMorin@giffordcarr.ca