



# CERTIFICATE OF INSURANCE

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*THIS CERTIFICATE OF INSURANCE IS TO CERTIFY TO:*  
**REGIONAL MUNICIPALITY OF YORK POLICE SERVICES BOARD AND THE REGIONAL MUNICIPALITY OF YORK**  
**17250 YONGE STREET, NEWMARKET, ONTARIO L3Y 6Z1**

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

<b>CERTIFICATE TYPE:</b>	<input type="checkbox"/> <b>Blanket</b>	<b>Covering the Named Insured for all work or activities performed for Regional Municipality Of York Police Services Board and/or for agreements with Regional Municipality Of York Police Services Board and/or for operations conducted within the Region</b> <hr/> <b>Region File No. and/or Description:</b>
	<input type="checkbox"/> <b>Project / Service Specific</b>	

<b>Insured:</b>	<b>Address:</b>
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TYPE OF INSURANCE	POLICY NO.	EFFECTIVE dd/mm/yyyy	EXPIRY dd/mm/yyyy	LIMIT (If other than CDN \$, indicate)	DEDUCTIBLE
<b>COMMERCIAL GENERAL LIABILITY (occurrence form)</b>				\$ Per occ. \$ Gen. Agg. \$ P&C Ops Agg	\$
<b>Non-Owned Auto</b>				\$	\$
<b>Employer's Liability</b>				\$	\$
<b>Sudden &amp; Accidental Pollution</b>				\$	\$
<b>AUTOMOBILE LIABILITY</b>				\$	\$
<b>UMBRELLA LIABILITY</b>				\$ Per occ. \$ Gen. Agg	\$
<b>GARAGE LIABILITY</b>				\$ Per occ. \$ Comp. \$ Collision	\$
<b>ALL RISK PROPERTY</b>				\$	\$
<b>BOILER &amp; MACHINERY</b>				\$	\$
<b>CRIME</b>				\$ Emp. Dish.	\$
<b>CONTRACTOR'S EQUIPMENT</b>				\$	\$
<b>PROFESSIONAL LIABILITY (Errors &amp; Omissions)</b>				\$ Per claim \$ Gen. Agg	\$
<b>ENVIRONMENTAL IMPAIRMENT</b>				\$ Per claim/occ \$ Agg	\$
<b>BUILDER'S RISK /INSTALLATION FLOATER</b>				\$	\$
<b>DIRECTOR'S &amp; OFFICER'S LIABILITY</b>				\$ Per claim \$ Gen. Agg	\$

**Required Provisions:**

1. Commercial General Liability policy is extended to include Personal Injury Liability, Contractual Liability, Owner's and Contractor's Protective Coverage, Products – Completed Operations, Contingent Employer's Liability, Cross Liability and Severability of Interest.
2. It is understood and agreed that **The Regional Municipality of York Police Services Board and The Regional Municipality of York are added as Additional Insureds to the Commercial General Liability and Umbrella Liability Policies** with respect to liability arising out of the operations of the Named Insured performed / supplied / conducted for/to the Region.
3. It is agreed and understood that the deductible or self insured retention (SIR) arranged between the Named Insured and the Insurers must be declared herein and is subject to approval by The Regional Municipality of York, Commissioner of Finance. It is further understood and agreed that claims arising out of the operations of the above mentioned project, which fall within the deductible or SIR limit, are the sole responsibility of the Named Insured.
4. If the insurance provided under the said policy(ies) is cancelled or if coverage is reduced, the Insuring Company will give thirty (30) days written notice in advance by registered mail of such a cancellation to: **The Regional Municipality of York, 17250 Yonge St, Newmarket, ON, L3Y 6Z1 Attn: Treasury Office, Finance Dept.**
5. The policy(ies) identified above shall apply as primary insurance and not excess to any other insurance available to the Additional Insured as set out in Item 2.

<b>DATE:</b>	<b>NAME &amp; ADDRESS OF INSURANCE COMPANY(IES)</b>
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**CERTIFICATION:** I certify that the insurance is in effect as stated in this certificate and that I have 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 4.

Broker Name & Address: Tel. No.: E-Mail Contact & Address:	<b>SIGNATURE AND STAMP OF CERTIFYING OFFICIAL</b>
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The Region reserves the right to contact your broker or insurer directly to obtain a renewal certificate on your behalf should your insurance coverage expire during the term of your contract with the Region.