

## **Certificate of Insurance Standard Form Certified Professional Program**

This certifies that policies of insurance as described below have been issued to the Insured named below and are in full force and effect at this time. It is understood and agreed that thirty (30) days' notice of cancellation of any of the policies listed below, with the exception of ICBC, will be given to the holder of this certificate.

NOTE:

PROOF OF INSURANCE WILL BE ACCEPTED ON THIS FORM ONLY, OR BY CERTIFIED COPIES OF INSURANCE POLICIES. INSURANCE COMPANIES MUST BE LICENSED TO OPERATE IN CANADA AND HAVE A MINIMUM AM BEST RATING OF A- OR HIGHER.

This Certificate is issued to: The City of Burnaby, 4949 Canada Way Burnaby, B.C. V5G 1M2					
Insured	Name:				
	Address:				
				·	
Broker	Name:	e: Agent's Name:			
Address:		Phone:			
Location, Purchase Order, or Contract No. and operations to which this Certificate applies:					
Nature of Operations:					
Project Specific Insurance applies to services provided on as/when required basis					
Type of Insurance		Insurer Name and Policy Number	Policy Term dd-mmm-yyyy	Limits of Liability/Amounts	
Section 1 Comprehensive/Commercial General Liability			From:	Bodily Injury, Death & Property Damage	
			То:	\$ Per Occurrence	
				\$ Aggregate \$ Deductible	
Section 2			From:	Personal Injury & Property Damage	
Automobile Liability (owned or leased vehicles)			То:	\$ Limit/Accident	
Section 3			From:	Constitution Constitution	
☐ Umbrella Liability ☐ Excess Liability			То:	\$ Excess Gen. Liability \$ Excess Auto Liability	
Section 4			From:	\$ Per Occurrence	
			То:	\$ Aggregate	
Particulars of General LiabilityInsurance (Sections 1 & 3): 🖂 indicates that the coverage is included.					
City of Burnaby as Additional Insured Premises & Operations Broad Form Products & Completed Operations Owners & Contractors Protective Blanket Contractual Cross Liability/Severability of Interests Employees as Additional Insureds Non-Owned Automobile Attached Machinery Occurrence Property Damage Contingent Employer's Broad Form Loss of Use Personal Injury		Vibration fr Removal o ctive property, b support is i f Interests Work belov ureds (XCU exter Pollution Li - Sudde le Incidental I 12 months 24 months	,	Advertising Liability Intentional Injury Volunteers as Additional Insureds	
These policies comply with the insurance requirements of the governing contract, permit, lease, license or other requirement of the City of Burnaby. It is understood and agreed any deductible or reimbursement clause shall be the sole responsibility of the Named Insured.  (Authorized to Sign on Behalf of Insurers)  Date Signed					
,	-	,	Date Signed		
INSURER OR BROKER TO STAMP HERE					
INTERNAL USE ONLY					

Not Approved

Approved

Certificate Deficiencies: