



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

CERTIFICATE TYPE:	Blanket	Covering the Named Insured for all work or activities performed for the City of Richmond Hill (the "City") and/or for all permits, plans, contracts and agreements with the City and/or for operations conducted within the City					
	Project / Service Specific Agreement	City File No. (s) and Project Title or Description:					
Named Insured:					Address of Named Insured:		
#	TYPE OF INSURANCE	POLICY NO.	EFFECTIVE DATE	EXPIRY DATE	LIMIT (if other than CDN \$ indicate)		Deductible
1	No XCU Exclusion Rigger's Liability (Hook, Crane & Hoist)					per occurrence	
						general aggregate	
						completed operations	
	Non-Owned Auto						
	Employer's Liability						
	Sudden & Accidental Pollution						
2	AUTOMOBILE LIABILITY						
3	UMBRELLA LIABILITY					per occurrence	
						general aggregate	
4	GARAGE LIABILITY					per occurrence	
						comprehensive	
						Collision	
5	ALL RISK PROPERTY						
6	BOILER AND MACHINERY						
7	CRIME					Employee Dishonesty	
8	CONTRACTOR'S EQUIPMENT						
9	CONTRACTOR'S POLLUTION LIABILITY <small>Asbestos Abatement Coverage</small>					per claim	
						general aggregate	
10	BUILDER'S RISK/ INSTALLATION FLOATER					per claim /	
						Aggregate	
11	ENVIRONMENTAL IMPAIRMENT						
12	PROFESSIONAL LIABILITY (Errors & Omissions)					per occurrence	
						general aggregate	
13	DIRECTOR'S & OFFICER'S LIABILITY					per claim	
						general aggregate	
14	AVIATION LIABILITY					per claim	
						general aggregate	



15	CYBER LIABILITY					
	Network & Information Security (3rd party)				per claim	
					general aggregate	
	Privacy Liability				per claim	
				general aggregate		
16	PERSONAL LIABILITY				per claim	
					general aggregate	
17	TENANT'S LEGAL LIABILITY				per claim	
					general aggregate	

REQUIRED PROVISIONS:

- (i) 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.
- (ii) 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 City. 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.
- (iii) 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 address above.
- (iv) 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 below.

Required Additional Insured(s) with respect to General Liability. It is understood and agreed that entity(ies) identified below is/are added as an Additional Insured(s) 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 City.	
The City of Richmond Hill	Other
The Richmond Hill Public Library Board	Other
The Regional Municipality of York	Other
Toronto and Region Conservation Authority (TRCA)	Other

*The City and its respective directors, officers, council members, boards and employees, including; Richmond Hill Fire and Emergency Services and the Richmond Hill Public Library Board.

DATE ISSUED	NAME & ADDRESS OF INSURANCE COMPANY(IES) Indicate line #s if multiple insurers	# Insurance Company(ies)
<p><i>Any enquiries regarding the completion of this form can be directed to risk.management@richmondhill.ca or 905-771-2487</i></p>		

CERTIFICATION I certify the following: a) that the insurance is in effect as stated in this certificate b) that I have authorization to issue this certificate for and on behalf of the insurer(s) and c) **that the above insurer is a Financial Services Regulatory Authority of Ontario (FSRA) Licensed Insurer listed on the List of Insurers Licensed to Transact Business under the Insurance Act.** This certificate is valid until the expiration date(s) shown unless notice is given in writing in accordance with Provision (iii) above.

Insurance Brokerage		Signature and Stamp of Certifying Official
Broker Name		
Address		
Tel		
Email		

The City 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 City.

THIS FORM MUST BE COMPLETED BY AN AUTHORIZED INSURANCE BROKER OR INSURANCE PROVIDER.