## **City of Toronto Contact Name and Address:** INRANTA City of Toronto, Licensing Services 850 Coxwell Avenue, 3rd Floor Toronto, Ontario M4C 5R1 Attn: Issuing Department Address and Telephone # of Insured Contractor/Trade: Name of Insured Contractor/Trade: Operations of Named Insured for which certificate is issued: (NOTE: Provide brief project description and the municipal address at which services being carried out) Address of Adjacent property and name of Adjoining Owner(s) to which the Right-of-entry permit relates: Commercial General Liability (minimum limit to be evidenced - \$1,000,000): Policy Limit(s) Insuring Company **Policy Number** Effective Date **Expiry Date** (per occurrence)

To be completed only by the Insurer or its representative

Commercial General Liability policy provisions:

- (i) The CITY OF TORONTO and the Adjoining Owner(s) are included as Additional Insureds with respect to liability arising out of the operations of the Insured in connection with the services being provided as described above.
- (ii) The Commercial General Liability Policy identified above shall apply as primary insurance and not excess to any other insurance available to the Additional Insureds as set out above, and shall include a cross-liability clause.
- (iii) If cancelled during the period of coverage as stated herein, thirty (30) days, (fifteen (15) days if cancellation is due to non-payment of premium), prior written notice by registered mail will be given by the Insurer(s) to the CITY OF TORONTO at the address provided on this Certificate.

## 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) stated in the "Expiry Date" provision, unless notice is given in writing in accordance with the provision of this Certificate.

Date	Broker's or Insurer's Name and Address	Signature and Stamp of Certifying Official