

To be completed only by the insurer or by its representative.

Name of Insured and Operating Name	City of Toronto Contact Name, Address, and Telephone Number:
Address and Telephone Number of Insured:	Municipal Licensing and Standards Road Allowance 850 Coxwell Avenue, 3rd Floor Ontario, M4C 5R1 CafeTO@toronto.ca
Operations of the named insured for which this Certificate is issued Cafes located within the Right of Way, including R57 Sidewalk Cafe and R58 Curb Lane Cafe permits	

Commercial General Liability – Minimum Limit to be evidenced - \$2,000,000.00				
Insuring Company	Policy Number	Policy Limit(s) (\$ per occurrence)	Effective Date (yyyy-mm-dd)	Expiry Date (yyyy-mm-dd)
Primary Insurer:				

PROVISIONS OF AMENDMENTS OR ENDORSEMENTS OF LISTED POLICY(IES)

Commercial General Liability is extended to include Bodily Injury Liability, Products liability, and any other provision relevant to the operators.

The City of Toronto has been included as an Additional Insured but only with respect to liability arising out of the operations of the Insured for which a permit, license or agreement has been issued by the City of Toronto.

The Commercial General Liability policy(ies) identified above shall protect each insured in the same manner and to the same extent as though a separate policy has been issued to each but nothing shall operate to increase the limits of liability as identified above beyond the amount or amounts for which the Company would be liable if there had been only one Insured.

If insurance is placed in primary and excess layers, file Separate certificates for each. The Commercial General Liability policy(ies) identified above shall apply as the primary insurance and not excess to any other insurance available to any of the Additional Insured as set out in Paragraph 2.

If the policy is canceled or changed in any manner, for any reason, during the period of coverage as stated herein so as to affect this certificate, thirty (30) days prior written notice (ten (10) days if cancellation is due to non-payment of premium) by registered mail will be given by the insurer to:

Municipal Licensing & Standards
850 Coxwell Avenue, 3rd Floor
Toronto, Ontario
M4C 5R1

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 (yyyy-mm-dd)	Broker's or Insurer's Name and Address	Signature of Certifying Official