

MINIMUM LIMITS OF INSURANCE REQUIRED

Commercial General Liability - \$5,000,000

Automobile Liability - \$5,000,000

**CERTIFICATE OF INSURANCE****Certificate Holder**

Stuart Olson Construction Ltd.

Insured**Project:****Project Owner:****Location:****Address:**

THIS IS TO CERTIFY THAT THE INSURANCE POLICIES LISTED BELOW HAVE BEEN ARRANGED FOR THE INSURED NAMED ABOVE. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS CONTAINED IN THE POLICIES.

Type of Policy / Insurer	Policy Number	Effective Date 12:01 am (DD/MM/YY)	Expiry Date 12:01 am (DD/MM/YY)	Limits of Liability	
Commercial General Liability Insurer:				\$	Per Occurrence
				\$	Products & Completed Operations Aggregate
				\$	General Aggregate
Automobile Liability Insurer:				\$	Per Occurrence
Umbrella/Excess Liability Insurer: <input type="checkbox"/> Excess Commercial General Liability <input type="checkbox"/> Excess Automobile Liability				\$	Each Occurrence
				\$	Products & Completed Operations Aggregate
				\$	General Aggregate
Professional Liability Insurer:				\$	Per Occurrence
				\$	General Aggregate
Pollution Liability Insurer:				\$	Per Occurrence
				\$	General Aggregate
Contractors Equipment Insurer:				\$	Property of Every Description

Additional Insured: The General Liability Insurance policy shall be endorsed to add Stuart Olson Construction Ltd. and the Project Owner shall be added as Additional Insureds to with respect to liability arising out of the Named Insured's operations in relation to the Project described herein.

Waiver of Subrogation: The policies stated herein shall be endorsed to waive any right of subrogation against Stuart Olson Construction Ltd. and the Project Owner with respect to the Contractor's Equipment policy in relation to the Project described herein.

Notice of Cancellation: The policies stated herein shall be endorsed to provide thirty (30) days prior written notice of cancellation to Stuart Olson Construction Ltd. and the Project Owner.

Insurance Broker:

Address:

Authorized Signature

Date

Phone Number:

Print Name/Title