



# CERTIFICATE OF LIABILITY INSURANCE

This certificate is issued as a matter of information only and confers no rights upon the certificate holder and imposes no liability on the insurer.  
This certificate does not amend, extend or alter the coverage afforded by the policies below.

<b>1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS</b>	<b>2. INSURED'S FULL NAME AND MAILING ADDRESS</b>
<b>Evidence of Insurance Only</b>	<b>Brad's Towing Ltd</b>
	<b>717 43rd St E</b>
	<b>Saskatoon, SK</b>
POSTAL CODE	POSTAL CODE <b>S7K 0V7</b>
<b>3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)</b>	

## Towing Company

### 4. COVERAGES

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated notwithstanding any requirements, terms or conditions of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described herein is subject to all terms, exclusions and conditions of such policies.

LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

TYPE OF INSURANCE	INSURANCE COMPANY AND POLICY NUMBER	EFFECTIVE DATE YYYY/MM/DD	EXPIRY DATE YYYY/MM/DD	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)		
				COVERAGE	DED.	AMOUNT OF INSURANCE
<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS MADE <b>OR</b> <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input type="checkbox"/> EMPLOYER'S LIABILITY <input type="checkbox"/> CROSS LIABILITY  <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION	<b>SGI Canada C701852193</b>	<b>2022/2/11</b>	<b>2023/2/11</b>	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE - EACH OCCURRENCE		<b>5,000,000</b>
				PRODUCTS AND COMPLETED OPERATIONS AGGREGATE <input type="checkbox"/> PERSONAL INJURY LIABILITY <b>OR</b> <input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY		<b>5,000,000</b>
				MEDICAL PAYMENTS		<b>25,000</b>
				TENANTS LEGAL LIABILITY		<b>100,000</b>
				POLLUTION LIABILITY EXTENSION		
<input type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES	<b>SGI Canada C701852193</b>	<b>2022/2/11</b>	<b>2023/2/11</b>	NON OWNED AUTOMOBILE		<b>5,000,000</b>
<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> DESCRIBED AUTOMOBILES <input checked="" type="checkbox"/> ALL OWNED AUTOMOBILES <input type="checkbox"/> LEASED AUTOMOBILES ** <small>** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE</small>	<b>SGI Canada T302474054</b>	<b>2022/7/30</b>	<b>2023/7/30</b>	BODILY INJURY AND PROPERTY DAMAGE COMBINED BODILY INJURY (PER PERSON) BODILY INJURY (PER ACCIDENT) PROPERTY DAMAGE		<b>5,000,000</b>
<b>EXCESS LIABILITY</b> <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>				EACH OCCURRENCE AGGREGATE		
<b>OTHER LIABILITY (SPECIFY)</b> <input checked="" type="checkbox"/> <b>Motor Truck Cargo</b> <input checked="" type="checkbox"/> <b>Automobile Liability</b> <input checked="" type="checkbox"/> <b>Commercial Package</b>	<b>SGI Canada C701083914</b>  <b>SGI Canada T302474054</b>  <b>SGI Canada C701852193</b>	<b>2022/6/11</b>  <b>2022/7/30</b>  <b>2022/2/11</b>	<b>2023/6/11</b>  <b>2023/7/30</b>  <b>2023/2/11</b>	<b>Motor Truck Cargo</b>  <b>Non-Owned Trailer (All Perils)</b>  <b>Automobile 3rd Party Liability</b>	<b>2,500</b>  <b>2,500</b>  	<b>500,000</b>  <b>100,000</b>  <b>5,000,000</b>

### 5. CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail \_\_\_\_\_ days written notice to the certificate holder named above, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

<b>6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS</b>	<b>7. ADDITIONAL INSURED NAME AND MAILING ADDRESS</b> (but only with respect to the operations of the Named Insured)
<b>Cooke Agencies Ltd.</b>	
<b>1-411 Confederation Drive</b>	
<b>Saskatoon, SK</b>	
POSTAL CODE	POSTAL CODE <b>S7L 5C3</b>
<b>BROKER CLIENT ID: BRADTOW-01</b>	POSTAL CODE

<b>8. CERTIFICATE AUTHORIZATION</b>	
ISSUER <b>Cooke Agencies Ltd.</b>	CONTACT NUMBER(S) TYPE <b>Phone</b> NO. <b>(306) 384-7000</b> TYPE <b>Fax</b> NO. <b>(306) 384-5995</b>
AUTHORIZED REPRESENTATIVE <b>Cooke Agencies Ltd.</b>	TYPE NO. TYPE NO.
SIGNATURE OF AUTHORIZED REPRESENTATIVE	DATE <b>2022/12/1</b> EMAIL ADDRESS <b>office@cookeinsurance.com</b>