



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.

1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS	2. INSURED'S FULL NAME AND MAILING ADDRESS
SPECIMAN CERTIFICATE	Triple Gold Trucking
PROOF ONLY	o/a 2260243 Ontario Inc.
PROOF ONLY	15 Grovewood Drive
	Brampton, ON
	POSTAL CODE L7A 3V3

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)
TRUCKMAN/Common Carrier - ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

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
COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE OR <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 <input type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES	Old Republic Insurance Company R35537D	2019/4/15	2020/4/15	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE - EACH OCCURRENCE		2,000,000
				PRODUCTS AND COMPLETED OPERATIONS AGGREGATE <input type="checkbox"/> PERSONAL INJURY LIABILITY OR <input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY		2,000,000
				MEDICAL PAYMENTS		25,000
				TENANTS LEGAL LIABILITY		100,000
				POLLUTION LIABILITY EXTENSION		
				NON OWNED AUTOMOBILE		
AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> DESCRIBED AUTOMOBILES <input 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>	Old Republic Insurance Company T35537D	2019/4/15	2020/4/15	BODILY INJURY AND PROPERTY DAMAGE COMBINED		2,000,000
				BODILY INJURY (PER PERSON)		
				BODILY INJURY (PER ACCIDENT)		
				PROPERTY DAMAGE		
				EACH OCCURRENCE		
				AGGREGATE		
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>						
OTHER LIABILITY (SPECIFY) <input checked="" type="checkbox"/> Commercial General Liability	Old Republic Insurance Company R35537D	2019/4/15	2020/4/15	Motor Truck Cargo	5,000	250,000
<input type="checkbox"/>						
<input type="checkbox"/>						

5. CANCELLATION
 Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail N/A 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.

6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS	7. ADDITIONAL INSURED NAME AND MAILING ADDRESS (but only with respect to the operations of the Named Insured)
Lawrie Insurance Group Inc.	Canada
105 Main Street East - 14th Floor	
Hamilton, ON	
	POSTAL CODE L8N1G6
BROKER CLIENT ID: TRIPGOL-01	POSTAL CODE

8. CERTIFICATE AUTHORIZATION	
ISSUER Lawrie Insurance Group Inc.	CONTACT NUMBER(S) TYPE Phone NO. (905) 525-7259 TYPE Fax NO. (905) 521-7989 TYPE NO. TYPE NO.
AUTHORIZED REPRESENTATIVE Katherine Irwin	
SIGNATURE OF AUTHORIZED REPRESENTATIVE <i>Katherine Irwin</i>	DATE 2019/4/11 EMAIL ADDRESS kirwin@danlawrie.com

Remarks:

ENDORSEMENTS INCLUDED

OPCF #20 LOSS OF USE, OPCF #27B NON OWNED TRAILER LIMIT \$40,000. ALL PERILS DEDUCTIBLE \$5,000. BENNINGTON FINANCIAL CORP ARE ADDED AS ADDITIONAL INSURED WITH RESPECTS TO THE 2020 UTILITY S/N 1UYVS2532L7807521 IN REGARDS TO THE COMMERCIAL GENERAL LIABILITY POLICY. BENNINGTON FINANCIAL CORP ARE ADDED AS A LOSS PAYE WITH RESPECTS TO THE 2020 UTILITY S/N 1UYVS2532L7807521.

PLEASE NOTE THIS TRAILER IS NOT ADDED TO THE POLICY UNTIL A OWNERSHIP/PLATE PORTION IS IN OUR CLIENTS NAME AND A COPY SENT TO MY OFFICE TO ADD.