



# CERTIFICATE OF LIABILITY INSURANCE

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>
Toronto Community Housing 931 Yonge Street Toronto, ON M4W 2H2	[REDACTED]

Use TCHC address of 931 Yonge St, Toronto, ON M4W 2H2

<b>3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES</b> (but only with respect to the operations of the Named Insured)
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Special events-Weekly Food Bank

Maintain the insurance coverage for the full duration of the use of space agreement

\$5,000,000 commercial general liability insurance coverage

Depending on the type of services provided (e.g. professional services such as financial, medical, legal services) Professional errors and omissions insurance ("E&O") with limits of not less than Two Million Dollars (\$2,000,000) per occurrence is required

<b>4. COVERAGES</b>
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 the terms, exclusions and conditions of such policies.
<b>LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS</b>

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>	[REDACTED]	2020/11/19	2021/11/19	Commercial General Liability Bodily Injury and Property Damage Liability - - General Aggregate	1,000	5,000,000
<input type="checkbox"/> Claims Made OR <input checked="" type="checkbox"/> Occurrence	[REDACTED]	Effective Date: 30 days prior to event or first date of a recurring event or as otherwise advised by TCHC		Liability - - Each Occurrence	1,000	5,000,000
<input type="checkbox"/> Products and/or completed operations	[REDACTED]			Products and Completed Operations Aggregate		
<input type="checkbox"/> Employer's Liability	[REDACTED]			<input checked="" type="checkbox"/> Personal Injury Liability		
<input checked="" type="checkbox"/> Cross Liability	[REDACTED]			<input type="checkbox"/> Personal and Advertising Injury Liability		
<input type="checkbox"/> Waiver of Subrogation	[REDACTED]			Medical Payments		25,000
<input checked="" type="checkbox"/> Tenants Legal Liability	[REDACTED]			Tenants Legal Liability	1,000	500,000
<input type="checkbox"/> Pollution Liability Extension	[REDACTED]			Pollution Liability Extension		
<input type="checkbox"/>	[REDACTED]					
<input type="checkbox"/>	[REDACTED]					
<input checked="" type="checkbox"/> Non-Owned Automobiles	[REDACTED]					Non-Owned Automobile
<input type="checkbox"/> Hired Automobiles	[REDACTED]			Hired Automobiles		
<b>AUTOMOBILE LIABILITY</b>	[REDACTED]			Bodily Injury and Property Damage Combined		
<input type="checkbox"/> Described Automobiles	[REDACTED]	Please Note: TCHC does not cover damage to property or content loss as a result of the services being run within the space ("licensed area")		Bodily Injury (Per Person)		
<input type="checkbox"/> All Owned Automobiles	[REDACTED]			Bodily Injury (Per Accident)		
<input type="checkbox"/> Leased Automobiles **	[REDACTED]			Property Damage		
** All Automobiles leased in excess of 30 days where the insured is required to provide insurance	[REDACTED]			Each Occurrence		
	[REDACTED]			Aggregate		
<b>EXCESS LIABILITY</b>	[REDACTED]					
<input type="checkbox"/> Umbrella Form	[REDACTED]					
<input type="checkbox"/>	[REDACTED]					
<b>OTHER LIABILITY (SPECIFY)</b>	[REDACTED]					
<input type="checkbox"/>	[REDACTED]					
<input type="checkbox"/>	[REDACTED]					
<input type="checkbox"/>	[REDACTED]					

Include TCHC as additional named insured on the policy for liability

<b>5. CANCELLATION</b>
Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 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> (Commercial general Liability - but only with respect to the operations of the Named Insured)
In the additional insured section when adding TCHC, reference the address in which the event is taking place at	Toronto Community Housing 2743 Victoria Park Avenue Scarborough, ON M1T 1G7

<b>8. CERTIFICATE AUTHORIZATION</b>	
Issuer [REDACTED]	Contact Number(s) Type [REDACTED] (519) 428-7716 No [REDACTED]
Signature of Authorized Representative X [REDACTED]	Date 2021   1   22 EMail Address [REDACTED]