

CSIO	CERTIFICATE OF INSURANCE	DATE (YY/MM/DD) 18/10/24
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BROKER Palmer Atlantic Insurance Ltd. 538 Main Street, Unit 1 Hartland, NB E7P 2N5	This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies below.
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BROKER'S CLIENT ID: QUALI-4	COMPANIES AFFORDING COVERAGE
	COMPANY A Old Republic Insurance Company

INSURED'S FULL NAME AND MAILING ADDRESS Quality Transportation Services (NB) Ltd. & R&L Logistics Ltd., 43 Sewell Road Jacksonville, NB E7M 3S1	COMPANY B COMPANY C COMPANY D
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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 requirement, term or condition 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.

LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	CO LTR	POLICY NUMBER	POLICY EFFECTIVE DATE (YY/MM/DD)	POLICY EXPIRATION DATE (YY/MM/DD)	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)
COMMERCIAL GENERAL LIABILITY					
<input type="checkbox"/> CLAIMS MADE OR <input checked="" type="checkbox"/> OCCURRENCE	A	R50056J	18/11/01	19/11/01	EACH OCCURRENCE \$ \$2000000
<input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS	A	R50056J	18/11/01	19/11/01	GENERAL AGGREGATE \$ \$2000000
<input type="checkbox"/> EMPLOYERS'S LIABILITY					PRODUCTS - COMP/OP AGG \$
<input type="checkbox"/> CROSS LIABILITY					PERSONAL INJURY \$
<input checked="" type="checkbox"/> TENANT'S LEGAL LIABILITY	A	R50056J	18/11/01	19/11/01	TENANT'S LEGAL LIABILITY \$ \$100,000
<input checked="" type="checkbox"/> NON-OWNED	A	R50056J	18/11/01	19/11/01	MED EXP (Any one person) \$
<input type="checkbox"/> HIRED					NON-OWNED AUTO \$ \$2000000
<input type="checkbox"/> POLLUTION LIABILITY EXTENSION					OPTIONAL POLLUTION LIABILITY EXTENSION \$
					(Per Occurrence) \$
					(Aggregate) \$
AUTOMOBILE LIABILITY					
<input type="checkbox"/> DESCRIBED AUTOMOBILES					BODILY INJURY PROPERTY DAMAGE COMBINED \$ \$2000000
<input checked="" type="checkbox"/> ALL OWNED AUTOS	A	T50056J	18/11/01	19/11/01	BODILY INJURY (Per person) \$
<input checked="" type="checkbox"/> LEASED AUTOMOBILES	A	T50056J	18/11/01	19/11/01	BODILY INJURY (Per accident) \$
<input checked="" type="checkbox"/> SEF # 27 - \$75,000 w/ \$10,000 Ded	A	T50056J	18/11/01	19/11/01	PROPERTY DAMAGE \$
<input checked="" type="checkbox"/> SEF # 5 Included	A	T50056J	18/11/01	19/11/01	
** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE					
EXCESS LIABILITY					
<input type="checkbox"/> UMBRELLA FORM					EACH OCCURRENCE \$
<input type="checkbox"/> OTHER THAN UMBRELLA FORM					AGGREGATE \$
(Specify) _____					
OTHER LIABILITY (SPECIFY) Cargo	A	R50056J	18/11/01	19/11/01	All Risk Deductible \$250,000 \$10,000

ADDITIONAL INSURED	DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS "ALL LIMITS IN CANADIAN FUNDS"
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CERTIFICATE HOLDER Quality Transportation Services NB Ltd. Fax - 325-2599 43 Sewell Road Jacksonville, NB E7M 3S1	CANCELLATION Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail <u>15</u> days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.
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SIGNATURE OF AUTHORIZED REPRESENTATIVE 	PRINT NAME INCLUDING POSITION HELD Lori Springer Commercial Dept-Fleet		
FAX NUMBER 506-375-4232	EMAIL ADDRESS	COMPANY Palmer Atlantic Insurance Ltd.	DATE 18/10/24