

CSIO

# 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>	
Quality Transportation Services (NB) Ltd.		Quality Transportation Services (NB) Ltd.	
43 Sewell Road		43 Sewell Road	
Jacksonville	NB	POSTAL CODE E7M 3S1	Jacksonville NB
POSTAL CODE		POSTAL CODE E7M 3S1	

**3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES** (If only one reason for the operation of the named insured)  
 All limits in Canadian funds. Reefer breakdown included. SEF#27B with \$200,000 limit for tractors and \$150,000 limit for trailers, \$2,500 Deductible. SEF#5 and Trailer Interchange. \*NOTE\* Cargo limit with primary and excess policy limits is \$1,000,000

**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 (YY/MM/DD)	EXPIRY DATE (YY/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 OR <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input type="checkbox"/> EMPLOYER'S LIABILITY <input type="checkbox"/> GROSS LIABILITY  <input type="checkbox"/> WAIVER OF SUBROGATION  <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION <input type="checkbox"/>	AIG Insurance Company of Canada RMGL9895509	2020/11/01	2021/08/01	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE - EACH OCCURRENCE  PRODUCTS AND COMPLETED OPERATIONS AGGREGATE  <input type="checkbox"/> PERSONAL INJURY LIABILITY OR <input type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY  MEDICAL PAYMENTS  TENANTS LEGAL LIABILITY  POLLUTION LIABILITY EXTENSION		2,000,000 2,000,000      2,500 2,000,000
<input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES	AIG Insurance Company of Canada RMGL9895509	2020/11/01	2021/08/01	NON-OWNED AUTOMOBILES HIRED AUTOMOBILES		2,000,000
<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> DESCRIBED AUTOMOBILES <input checked="" type="checkbox"/> ALL OWNED AUTOMOBILES <input checked="" type="checkbox"/> LEASED AUTOMOBILES ** ** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE	AIG Insurance Company of Canada RMB2651885	2020/11/01	2021/08/01	BODILY INJURY AND PROPERTY DAMAGE COMBINED BODILY INJURY (PER PERSON) BODILY INJURY (PER ACCIDENT) PROPERTY DAMAGE		2,000,000
<b>EXCESS LIABILITY</b> <input checked="" type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>	Aviva Insurance Company of Canada CONV0003	2020/11/01	2021/08/01	EACH OCCURRENCE AGGREGATE		3,000,000
<b>OTHER LIABILITY (SPECIFY)</b> <input checked="" type="checkbox"/> Cargo <input checked="" type="checkbox"/> Excess Cargo	AIG Insurance Company of Canada RMGL9895510  Aviva Insurance Company of Canada CMP 81399289	2020/11/01	2021/08/01	All Risk	2,500	126,000
						1,000,000

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 0 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. BROKER/AGENCY FULL NAME AND MAILING ADDRESS</b>		<b>7. ADDITIONAL INSURED NAME AND MAILING ADDRESS</b>	
Arthur J. Gallagher Canada Limited			
538 Main Street, Unit 1			
Hartland	NB	POSTAL CODE	E7P2N5
BROKER CLIENT ID:			

<b>8. CERTIFICATE AUTHORIZATION</b>		<b>ISSUER</b>	
AUTHORIZED REPRESENTATIVE		CONTACT NUMBER(S)	
SIGNATURE OF AUTHORIZED REPRESENTATIVE <i>P. Arseneault</i>		TYPE Phone NO. 508-375-7500	TYPE NO.
		TYPE Fax NO. 508-375-4232	TYPE NO.
		DATE 2020/10/27	EMAIL ADDRESS Parr_Arseneault@ajg.com