

CERTIFICATE OF INSURANCE

PROOF OF INSURANCE COVERAGE FOR THE INSURED SPECIFIED BELOW

This is to certify that policies of Insurance, subject to their terms, conditions and exclusions, are at present, in force for the Insured specified below with the insurer indicated below.

NAME OF INSURED: _____

ADDRESS OF INSURED: _____

ACTIVITIES COVERED: _____

| INSURER | POLICY NO. | EXPIRY DATE | LIMITS OF LIABILITY |
|---------|------------|-----------------------------|----------------------------------|
| _____ | _____ | _____ (MM / DD / YYYY) | \$ _____ (\$2,000,000 Min.) |

COMMERCIAL GENERAL LIABILITY COVERAGE INCLUDING:

Products and Completed Operations, Blanket Written Contractual, Owners and Contractors Protective, Severability of Interest or Cross Liability.

Aggregate Limit, Products and Completed Operations \$ _____

NON-OWNED AUTOMOBILE LIABILITY \$ _____

This is to certify that Prince George Agricultural and Historical Association and the City of Prince George has been added as an additional insured to the Commercial General liability Policy but ONLY with respect to liability arising out of operations by or on behalf of the named Insured.

This is also to certify that Policies (including endorsements) or insurance as described above have been issued by the undersigned to the named insured above and are in full force at this time. If cancelled, not renewed, or changed in any manner for any reason, thirty (30) days prior written notice will be given by this Insurance Company by registered mail to:

Prince George Agricultural and Historical Association P.O. Box 955, Prince George, BC V2L 4V1 and the City of Prince George, 1100 Patricia Blvd., Prince George, BC

Date: _____

Signed by: _____

Name of Brokerage:

*** THIS FORM MUST BE COMPLETED BY YOUR INSURANCE BROKER ONLY ***