

CERTIFICATE OF 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.

INSURED'S FULL NAME AND MAILING ADDRESS Exhibitor Name Exhibitor Street Address or P.O Box Vendor City, Province/State & Postal Code/Zip Code	BROKER'S FULL NAME AND MAILING ADDRESS Your Agent or Broker Address BROKER'S CLIENT ID:
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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 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)	
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"/> TENNANTS LIABILITY <input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES <input type="checkbox"/> POLLUTION LIABILITY EXTENSION	- Your Insurance Company - Your Policy No.	2025/01/22	2025/02/05	EACH OCCURRENCE GENERAL AGGREGATE PRODUCTS-COMP/OP AGG PERSONAL INJURY TENNANTS LEGAL LIABILITY MED EXP (Any one person) NON-OWNED AUTO OPTIONAL POLLUTION LIABILITY EXTENSION	\$2,000,000 \$2,000,000 \$2,000,000 \$2,000,000 \$250,000 \$ \$2,000,000 \$
AUTOMOBILE LIABILITY <input type="checkbox"/> DESCRIBED AUTOMOBILES <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> LEASED AUTOMOBILES ** ALL LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE				BODILY INJURY AND PROPERTY DAMAGE COMBINED BODILY INJURY (Per Person) BODILY INJURY (Per Accident) PROPERTY DAMAGE	\$ \$ \$ \$
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM (Specify) _____				EACH OCCURRENCE AGGREGATE	\$ \$
OTHER LIABILITY (SPECIFY) <input type="checkbox"/>					

ADDITIONAL INSURED NAME AND MAILING ADDRESS Vancouver International Boat Show, Boating BC Association, Canadian Boat Shows Inc., BC Place, B.C. Pavilion Corporation, Maritime Market and Marina Ltd., Warrington PCI Management or Canada Mortgage Housing Corporation	DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS THE CERTIFICATE HOLDER LISTED IS HEREBY ADDED AS ADDITIONAL INSURED WITH RESPECT TO LIABILITY ARISING OUT OF THE OPERATIONS OF THE NAMED INSURED ONLY.
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CERTIFICATE HOLDER - NAME AND MAILING ADDRESS Canadian Boat Shows Inc. 14 McEwan Drive West, Unit 8 Bolton, ON L7E 1H1 Canada	CANCELLATION Should any of the above policies be cancelled before the expiration date thereof, the issuing company will endeavour to mail 30 days written notice to the certificate holder named on 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		
FAX NUMBER	EMAIL ADDRESS	COMPANY	DATE