The Corporation of the City of Brampton
CERTIFICATE of INSURANCE

NOTE: Insurance Company MUST have a minimum rating of: 'B+' (A.M.Best); 'Baa' (Moody's); or 'BBB' (Standard and Poor's).

Insurance & Risk Management, Legislative Services Departmnt

SITE PLAN

** PROOF OF LIABILITY INSURANCE WILL BE ACCEPTED ONLY ON THIS FORM **

This is to certify that the policy(s) of insurance described below have been issued to the Insured for the policy period indicated for the servicing, installation of works, and all other requirements of the site plan agreement with

_____ **for site plan #** _____.
Name of Owner

NAME OF INSURED DEVELOPER *	**TELEPHONE NUMBER** AREA CODE ▷ ( ) - -
ADDRESS OF INSURED DEVELOPER	**CITY** **POSTAL CODE**

* **If the name of the Developer on the site plan agreement is not the same as on this Certificate of Insurance, then a letter, on the Developer's letterhead, is required with this certificate to explain the relationship. *NOTE: Also includes all external works as described and shown on engineering plans (if applicable)**

TYPE OF INSURANCE	INSURANCE COMPANY	POLICY NUMBER	EFFECTIVE (YR./MO./DAY)	EXPIRY DATE (YR./MO./DAY)	LIMITS OF LIABILITY SEE BELOW FOR MINIMUM REQUIREMENTS
COMMERCIAL GENERAL LIABILITY					
AUTOMOBILE LIABILITY					
ENVIRONMENTAL LIABILITY (for site plan with gas stn. and Sched. F - Municipal Works)					
☐ UMBRELLA ☐ EXCESS					

MINIMUM INSURANCE REQUIREMENTS:

A) Commercial General Liability – occurrence basis, applying to all operations of the Developer which shall include coverage for bodily injuryliabi lity, property damage liability, completed operations liability, contractual liability, and non-owned vehicle liability. This policy shall contain no exclusions for damage or loss from blasting, vibration, the removal or weakening of support, shoring, and underpinning or from any other activity or work that may be done in connection with the development of the Plan. Such policy shall be written with a limit of not less than FIVE MILLION DOLLARS ($5,000,000.00) exclusive of interest or cost.

B) Environmental Pollution Liability – claims-made basis to cover third party bodily injury and property damage claims arising out of sudden and accidental pollution, including but not limited to unexpected and unintentional spill, discharge, emission, dispersal, leakage, migration, release or escape of pollutants. The coverage can not be subject to the 120 hour reporting period and can not be limited to hostile fire only. Such policy shall be written with a limit of not less than FIVE MILLION DOLLARS ($5,000,000.00) exclusive of interest or costs, or such other limit as the City may reasonably require.

THE CORPORATION OF THE CITY OF BRAMPTON and THE REGIONAL MUNICIPALITY OF PEEL have been added as additional insureds under the above policies, but only with respect to the liability arising out of the operations of the Named Insured.

C) Automobile Liability (Owned and/or Leased Vehicles) insurance with an inclusive limit of liability of not less than TWO MILLION DOLLARS($2,000,000.00) exclusive of interest or costs, per occurrence for loss or damage resulting from bodily injury to or death of one or more persons and f or loss or damage to property of others as a result of owning, using or operating an automobile. This policy must cover all vehicles owned, leased or operated by or on behalf of the insured.

Should any of the above described policies be cancelled or materially changed so as to effect the coverage stated above, thirty (30) days prior written notice by registered mail (OR notification in compliance with the Statutory Conditions of OAP 1, Sept. 1, 2010 ed.) will be given by the insurer(s) to :

The Corporation of the City of Brampton,
Attn: Finance Dept. – Development Administration, 2nd Floor
2 Wellington Street West, Brampton, Ontario, L6Y 4R2
Fax: 905-874-2296 E-mail: admin.development@brampton.ca

This is to certify that the Policies of Insurance as described above have been issued by the undersigned to the insured named above and are in force at this time. The certificate is executed and issued to the aforesaid The Corporation of the City of Brampton and The Regional Municipality of Peel, the day and date herein written below:

DATE YR. MO. DAY ▷	NAME OF INSURANCE COMPANY (not broker)	
NAME OF INSURANCE BROKER	Brokers Phone Number	AUTHORIZED REPRESENTATIVE OR OFFICIAL BY:

***** THIS FORM MUST BE COMPLETED & SIGNED BY YOUR INSURANCE BROKER *****