



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.

1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS		2. INSURED'S FULL NAME AND MAILING ADDRESS	
To whom may concern		9064-4287 Québec Inc./Martin Roy Transport (MRT) 9168-4175 Québec Inc. 543, boulevard Témiscamingue Rouyn-Noranda, QC	
POSTAL CODE		POSTAL CODE J9X7C8	
3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)			

4. 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 YYYY/MM/DD	EXPIRY DATE YYYY/MM/DD	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)		
				COVERAGE	DED.	AMOUNT OF INSURANCE
COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE OR <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input checked="" type="checkbox"/> EMPLOYER'S LIABILITY <input checked="" type="checkbox"/> CROSS LIABILITY <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION <input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES	Intact Assurances 674-7873	2021/5/31	2022/5/31	COMMERCIAL GENERAL LIABILITY		
				BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE		2,000,000
				- EACH OCCURRENCE		2,000,000
				PRODUCTS AND COMPLETED OPERATIONS AGGREGATE		2,000,000
				<input type="checkbox"/> PERSONAL INJURY LIABILITY		
				OR <input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY		2,000,000
				MEDICAL PAYMENTS		10,000
TENANTS LEGAL LIABILITY						
POLLUTION LIABILITY EXTENSION						
<input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES	Intact Assurances 674-7873	2021/5/31	2022/5/31	NON OWNED AUTOMOBILE		2,000,000
AUTOMOBILE LIABILITY <input type="checkbox"/> DESCRIBED AUTOMOBILES <input checked="" type="checkbox"/> ALL OWNED AUTOMOBILES <input type="checkbox"/> LEASED AUTOMOBILES ** <small>** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE</small>	Intact Assurances 674-7873	2021/5/31	2022/5/31	BODILY INJURY AND PROPERTY DAMAGE COMBINED		2,000,000
				BODILY INJURY (PER PERSON)		
				BODILY INJURY (PER ACCIDENT)		
				PROPERTY DAMAGE		
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>	Lloyd's (BLP) P03390 JUST1066	2021/5/30	2022/5/30	EACH OCCURRENCE	10,000	3,000,000
				AGGREGATE	10,000	3,000,000
OTHER LIABILITY (SPECIFY) <input checked="" type="checkbox"/> Automobile assurance entris	Intact Assurances 674-7873	2021/5/31	2022/5/31	Ass. cargo	15,000	500,000

5. CANCELLATION
Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 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.

6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS		7. ADDITIONAL INSURED NAME AND MAILING ADDRESS (but only with respect to the operations of the Named Insured)	
Rivard Assurances Générales Inc 167, avenue Principale Rouyn-Noranda, QC			
POSTAL CODE J9X 4P6			
BROKER CLIENT ID: MARTROY-01		POSTAL CODE	

8. CERTIFICATE AUTHORIZATION		CONTACT NUMBER(S)	
ISSUER Rivard Assurances Générales Inc		TYPE Phone NO (819) 762-6533	TYPE Fax NO (819) 762-4683
AUTHORIZED REPRESENTATIVE Stéphane Perron		TYPE NO	TYPE NO
SIGNATURE OF AUTHORIZED REPRESENTATIVE	DATE 2021/5/27	EMAIL ADDRESS stephane.perron@rivardassurances.ca	