

LIABILITY INSURANCE CERTIFICATE Facility Use



Section 6 b) – Staff to select the required # of days Written Notice <u>before</u> sending out for completion. Section 2 through 6 – to be completed and executed by the Insurer or its Authorized Representative

| 1. THIS CERTIFICATE IS ISSUED TO: | | | | |
|-----------------------------------|---|---|---|--|
| | ☐ City of Vancouver, 453 West 12 th Avenue, Vancouver BC V5Y 1V4 ☐ Board of Parks and Recreation, 2099 Beach Avenue, Vancouver, BC, V6G 1Z4 FAX / (604) 257-8427 and certifies that the insurance policies as listed herein have been issued to the Named Insured(s) and are in full force and effect as of the effective date of the agreement described below. | | | |
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| 2. | NAMED INSURED: [must be the same name as the Permittee/L incorporated company(ies)]. If the Named In names must be included as "Named Insured | nsured is covered under a Parent Co | | |
| | MAILING ADDRESS: | | | |
| | FACILITY LOCATION: | | | |
| | NAME OF FACILITY: | | | |
| 3. | COMMERCIAL GENERAL LIABILITY INSURANCE (Occurrence Fincluding the following extensions: | | IMITS OF LIABILITY: (Bodily Injury and Property Damage Inclusive) | |
| | ✓ Personal Injury ✓ Products and Completed Operations | Per Occurrence: | \$ | |
| | √ Cross Liability or Severability of Interest √ Employees as Additional Insureds | Aggregate: | \$ | |
| | √ Blanket Contractual Liability √ Non-Owned Auto Liability | All Risk Tenants' Legal Liability: | \$ | |
| | INSURER: | _ | | |
| | POLICY NUMBER: to to | - | \$ | |
| 4. | ☐ UMBRELLA OR ☐ EXCESS LIABILITY INSURANCE LIMITS OF LIABILITY: (Bodily Injury and Property Damage Inclusive) | | | |
| | INSURER: | | \$ | |
| | POLICY NUMBER: to to | | \$ \$ | |
| 5. | OTHER INSURANCE (e.g. Volunteer's Accident & Death Insuranc Policy Number, Policy Period, and Limit | e, Directors and Officers Liability In: | surance) – Please specify Name of Insurer(s | |
| 6. | OLICY PROVISIONS: Where required by the governing contract, agreement, lease, permit or license, it is understood and agreed that: The City of Vancouver, Vancouver Board of Parks & Recreation and its affiliated community centre associations and societies, their of officers, employees, servants, agents, and volunteers have been added as Additional Insureds with respect to liability arising out activities conducted by or in connection with the operation of the Named Insured including, but not limited to, any stunt or special activities; FIFTEEN (15) days written notice of cancellation or material change resulting in reduction of coverage with respect to any of the polisted herein, either in part or in whole, will be given by the Insurer(s) to the Holder of this Certificate; the exception is cancellation for payment of premiums in which case the applicable statutory conditions will apply; The insurance policy (policies) listed herein shall be primary with respect to all claims arising out of the operation of the Named Insurance and societies shall be in excess of this insurance and shall not contribute to it. | | | |
| | SIGNED BY THE INSURER OR ITS AUTHORIZED REPRESENTATIVE | | | |
| | DRINT NAME OF INCURED OR ITS AUTHORITED REPOSSES. | TIVE ADDRESS AND BUSINESS | Dated: | |
| | PRINT NAME OF INSURER OR ITS AUTHORIZED REPRESENTA | TIVE, ADDRESS AND PHONE NUMI | DEK | |