



LIABILITY INSURANCE CERTIFICATE Facility Use



Section 6 b) – Staff to select the required # of days Written Notice before 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 12th 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.

- 2. NAMED INSURED:** *[must be the same name as the Permittee/Licensee or Party(ies) to Contract and is/are either an individual(s) or a legally incorporated company(ies)]. If the Named Insured is covered under a Parent Company's insurance policy, both company names must be included as "Named Insured".*

MAILING ADDRESS: _____

FACILITY LOCATION: _____

DESCRIPTION OF OPERATION, CONTRACT, AGREEMENT, LEASE, PERMIT OR LICENSE: _____

3. COMMERCIAL GENERAL LIABILITY INSURANCE (Occurrence Form)

Including the following extensions:

- Personal Injury
- Products and Completed Operations
- Cross Liability or Severability of Interest
- Employees as Additional Insureds
- Blanket Contractual Liability
- Non-Owned Auto Liability

LIMITS OF LIABILITY: (Bodily Injury and Property Damage Inclusive)

Per Occurrence: \$ _____

Aggregate: \$ _____

All Risk Tenants' Legal Liability: \$ _____

INSURER: _____

Deductible Per Occurrence: \$ _____

POLICY NUMBER: _____

POLICY PERIOD: From _____ to _____

4. UMBRELLA OR EXCESS LIABILITY INSURANCE

LIMITS OF LIABILITY: (Bodily Injury and Property Damage Inclusive)

INSURER: _____

Per Occurrence: \$ _____

POLICY NUMBER: _____

Aggregate: \$ _____

POLICY PERIOD: From _____ to _____

Self-Insured Retention: \$ _____

- 5. OTHER INSURANCE (e.g. Volunteer's Accident & Death Insurance, Directors and Officers Liability Insurance) – Please specify Name of Insurer(s), Policy Number, Policy Period, and Limit**

6. POLICY PROVISIONS:

Where required by the governing contract, agreement, lease, permit or license, it is understood and agreed that:

- a) *The City of Vancouver, Vancouver Board of Parks & Recreation and its affiliated community centre associations and societies, their officials, officers, employees, servants, agents, and volunteers have been added as Additional Insureds with respect to liability arising out of any activities conducted by or in connection with the operation of the Named Insured including, but not limited to, any stunt or special effect activities;*
- b) *FIFTEEN (15) days written notice of cancellation or material change resulting in reduction of coverage with respect to any of the policies listed 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 non-payment of premiums in which case the applicable statutory conditions will apply;*
- c) *The insurance policy (policies) listed herein shall be primary with respect to all claims arising out of the operation of the Named Insured. Any insurance or self-insurance maintained by the City of Vancouver, Vancouver Board of Parks & Recreation and its affiliated community centre associations and societies shall be in excess of this insurance and shall not contribute to it.*

SIGNED BY THE INSURER OR ITS AUTHORIZED REPRESENTATIVE

PRINT NAME OF INSURER OR ITS AUTHORIZED REPRESENTATIVE, ADDRESS AND PHONE NUMBER _____ Dated: _____