



CERTIFICATE OF LIABILITY INSURANCE

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 it May Concern	American Top Rider Freight Ltd. 14850 71 Ave. Surrey, BC V3S 0TX3

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)
Trucks for Hire/ Including Reefer Breakdown/ Commodities as per policy.

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 the 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 type="checkbox"/> Employer's Liability <input type="checkbox"/> Cross Liability <input checked="" type="checkbox"/> Waiver of Subrogation <input checked="" type="checkbox"/> Tenants Legal Liability <input type="checkbox"/> Pollution Liability Extension <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Non-Owned Automobiles <input type="checkbox"/> Hired Automobiles	Intact Insurance Co. 5IM534426	2020 / 6 / 11	2021 / 6 / 11	Commercial General Liability Bodily Injury and Property Damage Liability - - General Aggregate - Each Occurrence	2,500	2,000,000 5,000,000
				Products and Completed Operations Aggregate		2,000,000
				<input type="checkbox"/> Personal Injury Liability <input checked="" type="checkbox"/> Personal and Advertising Injury Liability	2,500	2,000,000
				Medical Payments		10,000
				Tenants Legal Liability	2,500	500,000
				Pollution Liability Extension		
AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> Described Automobiles <input checked="" type="checkbox"/> All Owned Automobiles <input checked="" type="checkbox"/> Leased Automobiles ** ** All Automobiles leased in excess of 30 days where the insured is required to provide insurance	Insurance Corp of BC 44009P	2019 / 12 / 1	2020 / 11 / 30	Bodily Injury and Property Damage Combined		10,000,000
				Bodily Injury (Per Person)		10,000,000
				Bodily Injury (Per Accident)		10,000,000
				Property Damage		10,000,000
EXCESS LIABILITY <input type="checkbox"/> Umbrella Form <input type="checkbox"/>				Each Occurrence		
				Aggregate		
OTHER LIABILITY (SPECIFY) <input checked="" type="checkbox"/> Cargo Incl. Reefer Brkdn <input type="checkbox"/> <input type="checkbox"/>	Intact Insurance Co. 5IM534426	2020 / 6 / 11	2021 / 6 / 11	Broad Form	2,500	300,000

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 (Commercial general Liability - but only with respect to the operations of the Named Insured)
Pacific Coast Insurance Brokers Inc. Unit 102, 12030 80th Ave Surrey V3W 3M1 BROKER CLIENT ID: AME38	

8. CERTIFICATE AUTHORIZATION			
Issuer	Pacific Coast Insurance Brokers Inc.	Contact Number(s)	
Authorized Representative		Type No	Type No
Signature of Authorized Representative <input checked="" type="checkbox"/>		Type Phone No (604) 599-0881	Type Fax No (604) 543-0881
		Date	EEmail Address
		2020 6 9	info@pcibrokers.com