## **CSI**

## **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.

Column   C	1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS					2. INSURED'S FULL NAME AND MAILING ADDRESS					
DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (as only with required to have been issued to the insured named above for the policy period indicated notwithstending any requirements, terms subject to all forms, and conditions of such policy.    COVERAGES	TO WHOM IT MAY CONCERN				COO Transporter & Logistics Inc.						
**DESCRIPTION OF OPERATIONS.AUTOMOBILES/SPECIAL TENS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the consent inswerd inswerd the control inswerd to which this certificate may be issued or may perhain. The insurance allocated by the policies described phreme with respect to which this certificate may be issued or may perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition of any control or any perhain. The insurance allocated by the policies described hereins is subject to all from a condition or allocated by the policies described hereins is subject to all from a condition or allocated by the policies described hereins and the condition of any						8 Tysonville Cir					
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This is to certify that the policies of insurance islanded below have been issued to the insured named above for the policy period indicated not otherwise described herein is subject to white this certificate may be resisted to the principle of the policy period indicated not the three conditions and conditions are considered to the policy period indicated not previous subjects to all times, exclusions and conditions are conditions.    INSURANCE OR   PROJECT	THIS CERTIFICATE ISSUED UNDER THE INT	EREST OF THE NAMED IN	ISURED.								
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COMMERCIAL GENERAL LIABILITY    CAMPS WINE OR.   COLUMBRING   CAMPS WINE OR.   CA	TYPE OF INSURANCE						(Canadian dollars unless indicated otherwise)				
CLAMB MADE OR   COURTERING   APPEL CAMADA   2023/0425   2024/0425   EMERITY   EMERITY CORRESPONDED   2.000.000				YYYY/MN	N/DD	YYYY/MM/DD	COVERAGE	DED.			
CALL COCUMENTS OF CONTROLLED OPERATIONS   244441		APRIL CANADA		2023/04/	/25	2024/04/25	BODILY INJURY AND PROPERTY DAMAGE	E	2,000,000	)	
PRODUCTION AND CONTROL PROPERTY   2,000,000   2,000,	— —	424341					- EACH OCCURRENCE	1,000	2,000,000		
Comparison   Com	☑ EMPLOYER'S LIABILITY							NS	2,000,000		
WAVEROF SUBROGATION  TENANTS LEGAL LIVERITY  DOLUTION LIBERITY EXTENSION  NON-OWNED AUTOMOBILES  HIRER AUTOMOBILES  ALL OWNED AUTOMOBILES  AND AUTOMOBILES  AND	CROSS LIABILITY						PERSONAL INJURY LIABILITY				
TEMNITS LEGAL LIABILITY POLUTION LIABILITY EXTENSION POLUTION LIABILITY EXTENSION POLUTION LIABILITY EXTENSION POLUTION LIABILITY POLUTION LIABILITY EXTENSION POLUTION LIABILITY EXTENSION POLUTION LIABILITY POLUTION LIABILITY PROBLET LIABILITY PROBLET LIABILITY PROBLET LIABILITY PROBLET LIABILITY PROBLET LIABILITY PROPLET LIABILITY PR	☐ WAIVER OF SUBROGATION	WAIVER OF SUBROGATION					PERSONAL AND ADVERTISING INJURY	1,000	2,000,000		
POLUTION LIABILITY EXTENSION   POLUTION LIABILITY							MEDICAL PAYMENTS		25,000		
MON-OWNED AUTOMOBILES	TENANTS LEGAL LIABILITY						TENANTS LEGAL LIABILITY	1,000	250,000		
NON-OWNED AUTOMOBILES	POLLUTION LIABILITY EXTENSION						POLLUTION LIABILITY EXTENSION				
NON-OWNED AUTOMOBILES   NON-OWNED AUTOMOBILES   HIRED AUTOMOBILES   HIRED AUTOMOBILES   HIRED AUTOMOBILES   HIRED AUTOMOBILES   HIRED AUTOMOBILES   HIRED AUTOMOBILES   LADILITY   DESCRIBED AUTOMOBILES   DESCRIBED NE EXCRIBED NE EXCRIBED NE EXCRIBED NE EXCRIBED NE EXCRIBED NE REGURED PORTOWORK RAUMANCE   DESCRIPTION NE REGURED PROPERTY DAMAGE   DESCRIPTION											
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□ LEASED AUTOMOBILES  "ALLA LOTOMOBILES " "ALLA DYNOBORIES " "ALLA TOMOBILES " "ALL	DESCRIBED AUTOMOBILES			2023/04/07		2024/04/07			2,000,000	i	
ALIATOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE   EACH OCCURRENCE      WIRRELLA FORM   EACH OCCURRENCE		BINDCOO					BODILY INJURY (PER PERSON)				
TO PROVIDE INSURANCE  EXCESS LIABILITY  UMBRELLA FORM  UMBRELLA F	** ALL AUTOMOBILES LEASED IN EXCESS OF						BODILY INJURY (PER ACCIDENT)				
UMBRELLA FORM  □ UMBRELLA FORM □ MOTOR TRUCK CARGO APRIL CANADA 2023/04/25 2024/04/25 BROAD FORM 5,000 250,000 □ REEFER BREAKDOWN INCLUDED 424341 5,000  S. 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  Cracle Insurance Risk Management Services Inc.  25 Edilcan Dr., Unit 7  Vaughan ON POSTAL L4K 3S4  BROKER CLIENT ID: 61718055 POSTAL  AUTHORIZED REPRESENTATIVE Nayan Pandya  CONTACT NUMBER(S) TYPE Mobile NO. (416) 858-3447 TYPEFax NO. TYPE Mobile NO. (416) 858-3447 TYPEFax NO. TYPE Mobile NO. (416) 858-3447 TYPEFax NO. TYPE Mobile NO. (416) 858-75123 TYPE NO.  SIGNATURE OF	30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE						PROPERTY DAMAGE				
OTHER LIABILITY (SPECIFY)  ✓ MOTOR TRUCK CARGO  APRIL CANADA  2023/04/25  ZO24/04/25  BROAD FORM  5,000  Z50,000  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  Cracle Insurance Risk Management Services Inc.  Z5 Edilcan Dr., Unit 7  Vaughan  ON  POSTAL CODE  CONTACT NUMBER(S)  TYPE Mobile NO. (416) 858-3447  TYPEFax NO.  TYPE Mobile NO. (416) 858-3447  TYPE Fax NO.  SIGNATURE OF  EMAIL ADDRESS anadom@energement.com  POST SEMAN ADDRESS anadom@energement.com  SIGNATURE OF	EXCESS LIABILITY						EACH OCCURRENCE				
OTHER LIABILITY (SPECIFY)  ✓ MOTOR TRUCK CARGO  APRIL CANADA  2023/04/25  Z024/04/25  BROAD FORM  5,000  Z50,000  Z50,0	_						AGGREGATE				
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Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail	OTHER LIABILITY (SPECIFY)										
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  Oracle Insurance Risk Management Services Inc.  25 Edilcan Dr., Unit 7  Vaughan  ON  POSTAL CODE  BROKER CLIENT ID: 61718055  CERTIFICATE AUTHORIZATION  ISSUER Oracle RMS - Peel & York  AUTHORIZED REPRESENTATIVE Nayan Pandya  SIGNATURE OF  DATE 2020 AASE EMAIL ADDRESS pacetic@executors.exp.	☑ MOTOR TRUCK CARGO	APRIL CANADA		2023/04/	/25	2024/04/25	BROAD FORM	5,000	250,000		
Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail	☑ REEFER BREAKDOWN INCLUDED	424341					5,000				
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)  25 Edilcan Dr., Unit 7  Vaughan  ON  POSTAL Lak 3S4  BROKER CLIENT ID: 61718055  8. CERTIFICATE AUTHORIZATION  ISSUER Oracle RMS - Peel & York  AUTHORIZED REPRESENTATIVE Nayan Pandya  CONTACT NUMBER(S) TYPE Mobile NO. (416) 858-3447 TYPEFax NO.  TYPE Business NO. 905 597 5123 TYPE NO.	5. CANCELLATION										
Oracle Insurance Risk Management Services Inc.  25 Edilcan Dr., Unit 7  Vaughan  ON  POSTAL CODE  L4K 3S4  BROKER CLIENT ID: 61718055  BROKER CLIENT ID: 61718055  CERTIFICATE AUTHORIZATION  ISSUER Oracle RMS - Peel & York  AUTHORIZED REPRESENTATIVE Nayan Pandya  CONTACT NUMBER(S) TYPE Mobile NO. (416) 858-3447 TYPE Fax NO.  SIGNATURE OF  POSTAL CODE  CONTACT NUMBER(S) TYPE Mobile NO. (416) 858-3447 TYPE NO.  FMAIL ADDRESS promotive@conductors are promotive.	Should any of the above described policie holder named above, but failure to mail su	s be cancelled before the ch notice shall impose n	e expiration date o obligation or I	thereof, the	ne issu any kin	uing company wind upon the con	vill endeavor to mail <u>30</u> days npany, its agents or representative	written notice	to the certi	ificate	
Oracle Insurance Risk Management Services Inc.  25 Edilcan Dr., Unit 7  Vaughan  ON  POSTAL CODE L4K 3S4  BROKER CLIENT ID: 61718055  S. CERTIFICATE AUTHORIZATION  ISSUER Oracle RMS - Peel & York  AUTHORIZED REPRESENTATIVE Nayan Pandya  SIGNATURE OF  POSTAL CODE  CONTACT NUMBER(S) TYPE Mobile NO. (416) 858-3447 TYPE Fax NO. TYPE Business NO. 905 597 5123 TYPE NO.	6. BROKERAGE/AGENCY FULL NAM	E AND MAILING ADDR	RESS						he Named In	sured)	
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