

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
Trailer Wizards Ltd. 1880 Britannia Road East Mississauga ON POSTAL CODE L4W 1J3	All Link Logistics System Ltd 54 Cinrickbar Drive Etobicoke ON POSTAL CODE M9W 6X3
3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)	
Common Carrier See Attached...	

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"/> COMBINED SINGLE LIMIT <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OR <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input 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 type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES	CBC0660001C	2016/11/27	2017/11/27	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE - 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		
				TENANTS LEGAL LIABILITY		\$500,000
				POLLUTION LIABILITY EXTENSION		
				NON OWNED AUTOMOBILE		
AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> DESCRIBED AUTOMOBILES <input type="checkbox"/> ALL OWNED AUTOMOBILES <input type="checkbox"/> LEASED AUTOMOBILES ** ** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE OTHER (SPECIFY) <input checked="" type="checkbox"/> Motor Truck Cargo <input checked="" type="checkbox"/> Reefer Breakdown <input checked="" type="checkbox"/> OPCF27B Legal Lib. Dmg. <input checked="" type="checkbox"/> Auto Phys. Dmg. -All Perils <input checked="" type="checkbox"/> 5G <input type="checkbox"/>	CBC0660001	2016/11/27	2017/11/27	BODILY INJURY AND PROPERTY DAMAGE COMBINED		\$2,000,000
				BODILY INJURY (PER PERSON)		
				BODILY INJURY (PER ACCIDENT)		
				PROPERTY DAMAGE		
				Per Vehicle	\$5,000	\$250,000
	Northbridge General Insuranc CBC0660001C	2016/11/27	2017/11/27	Included		
	CBC0660001	2016/11/27	2017/11/27	Non-Owned Trailers	\$5,000	\$85,000
	Northbridge General Insuranc CBC0660001	2016/11/27	2017/11/27	Tractors	\$5,000	

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)
Dalton Timmis 35 Stone Church Rd, 3rd Floor Ancaster ON POSTAL CODE L9K 1S5	
BROKER CLIENT ID:	

8. CERTIFICATE AUTHORIZATION	
ISSUER	CONTACT NUMBER(S) TYPE Phone NO. 905-648-3922 TYPE NO. TYPE Fax NO. 905-648-2640 TYPE NO.
AUTHORIZED REPRESENTATIVE Kathy Pearson	
SIGNATURE OF AUTHORIZED REPRESENTATIVE	DATE 2017/01/24 EMAIL ADDRESS aleksandrab@daltontimmis.com

DESCRIPTIONS Continued.

It is hereby understood and agreed that the certificate holder is added as Additional Insured to the General Liability Policy, but only with respect to Liability arising solely from the operations of the named insured.

2009 WABASH 1JJV533W39L284414
2006 LODGE KING 2LDPF48216K044834