



FACILITY RENTAL CERTIFICATE OF INSURANCE

This form must be completed and signed by Agent, Broker or Insurer

1. Proof of liability insurance will be accepted on this form only (with no amendments).
2. If a facsimile has been transmitted, the original certificate must follow
3. Insurance company must be licensed to operate in Canada

Name of Insured	Telephone:
Insured's Mailing Address:	Fax:
Name of the Event:	Date of the Event:

Type of Insurance	Insuring Company (Full Legal Name)	Policy Number(s)	Effective Date YY/MM/DD	Expiry Date YY/MM/DD	Limits of Liability
Commercial General Liability					\$2,000,000

OR IF APPLICABLE:

Type of Insurance	Insuring Company (Full Legal Name)	Policy Number(s)	Effective Date YY/MM/DD	Expiry Date YY/MM/DD	Limits of Liability
Host Liquor Liability					\$5,000,000
Fireworks					\$5,000,000
Midway Rides and bouncy castles					\$5,000,000
Derby, motorized vehicles					\$5,000,000
Regional Road events					\$5,000,000
Livestock					\$5,000,000
Other					
Excess Liability					

Commercial General Liability written on an occurrence basis is extended to include Bodily Injury Including Death, Personal Injury Liability, Broad Form Property Damage, Blanket Contractual Liability, Non-Owned Automobile Liability and contain a Cross Liability Clause and Severability of Interest Clause.

The following party (ies) has been added as Additional Insured but only with respect to their interest in the operations of the Named Insured as indicated by the checked box.

- THE CORPORATION OF THE TOWN OF HALTON HILLS
- The Halton District School Board
- The Halton Catholic District School Board

The policy (ies) identified above shall apply as primary insurance and not excess to any other insurance available to **The Corporation of the Town of Halton Hills and other additional insured as indicated**. If cancelled during the period of coverage as stated herein, thirty (30) days, prior written notice by registered mail shall be given by the Insurer(s) to: The Corporation of the Town of Halton Hills, **Attention: Recreation & Parks**, 1 Halton Hills Drive, Halton Hills ON L7G 5G2 Fax: 905-873-1587

I certify that the insurance is in effect as stated in this certificate and that I have authorization to issue this certificate for and on behalf of the insurer(s)

Name of Insurance Company or Broker (completing form)		Telephone No.
Address		Fax No.
Name of Authorized Representative or Official. (Please Print)	Signature of Authorized Representative or Official	Date