

CSIO CERTIFICATE OF INSURANCE

DATE (YY/MM/DD)

11/06/14

BROKER

Safety Insurance
**538 Main Street, Unit 1
Hartland, NB**
E7P 2N5

 BROKER'S CLIENT ID: **SEAFO-2**

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies below.

COMPANIES AFFORDING COVERAGE

 COMPANY
A Markel Insurance

 COMPANY
B

 COMPANY
C

 COMPANY
D

INSURED'S FULL NAME AND MAILING ADDRESS

Seafood Express (PEI) Ltd.
**Box 1267
Charlottetown, PE C1A 7M8**
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 requirement, term or condition 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	CO LTR	POLICY NUMBER	POLICY EFFECTIVE DATE (YY/MM/DD)	POLICY EXPIRATION DATE (YY/MM/DD)	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)	
COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE OR <input checked="" type="checkbox"/> OCCURRENCE <input type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input type="checkbox"/> EMPLOYERS'S LIABILITY <input checked="" type="checkbox"/> CROSS LIABILITY <input type="checkbox"/> TENANT'S LEGAL LIABILITY <input checked="" type="checkbox"/> NON-OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> POLLUTION LIABILITY EXTENSION	A	2020010	11/02/28	12/02/28	EACH OCCURRENCE	\$ 500000
					GENERAL AGGREGATE	\$ 600000
					PRODUCTS - COMP/OP AGG	\$
					PERSONAL INJURY	\$ 500000
					TENANT'S LEGAL LIABILITY	\$
					MED EXP (Any one person)	\$ 10,000
					NON-OWNED AUTO	\$ 500000
					OPTIONAL POLLUTION LIABILITY EXTENSION	\$
					(Per Occurrence)	\$
					(Aggregate)	\$
AUTOMOBILE LIABILITY <input type="checkbox"/> DESCRIBED AUTOMOBILES <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> LEASED AUTOMOBILES SEP # 27 - \$100,000 SEP# 5, Permission Rent or Lease	A	2020010	11/02/28	12/02/28	BODILY INJURY PROPERTY DAMAGE COMBINED	\$ 500000
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE	\$
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM (Specify) _____					EACH OCCURRENCE	\$
					AGGREGATE	\$
OTHER LIABILITY (SPECIFY) Cargo	A	2020010	11/02/28	12/02/28	All Risk	600,000

ADDITIONAL INSURED

DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS

All Limits in Canadian Funds. Mechanical Breakdown Reefer Warrenty Included
CERTIFICATE HOLDER
**Seafood Express (PEI) Ltd.
Fax - 902-566-5848
Insurance Dept.
PO Box 1267
Charlottetown, PE C1A 7M8**
CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 15 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

SIGNATURE OF AUTHORIZED REPRESENTATIVE

PRINT NAME INCLUDING POSITION HELD

Pam Arsenault, CAIB Commercial Dept-Fleet

FAX NUMBER

506-375-4232

EMAIL ADDRESS

COMPANY

Safety Insurance Services.

DATE

11/06/14

CSIO CERT (6/00)

OP ID PA

CSR PA