



CERTIFICATE OF INSURANCE

“Special Event”

INSURANCE BROKER (Name, Address, Phone)	This certificate does not amend, extend or alter the coverage afforded by the policies below. Only those sections completed are applicable.	
COMPANIES AFFORDING COVERAGE		
	Insurer A	
	Insurer B	
NAMED INSURED (Name, Address, Phone)	Insurer C	
	Insurer D	
	Insurer E	

COVERAGE

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 pertain. The insurance afforded is subject to all the terms, exclusions and conditions of the policies described herein. Limits may have been reduced by paid claims.

Ins Ltr	Type of Insurance	Policy No.	Policy Effective Date (M/D/YY)	Policy Expiry Date (M/D/YY)	Limits
COMMERCIAL GENERAL LIABILITY					
A	Occurrence Form				Each Occurrence
	Non-Owned Automobile				Annual Aggregate
	Tenants All Risk Legal Liability				BI & PD Deductible/occurrence
	Blanket Contractual Liability				Medical Expenses/person
	City of Lethbridge as Additional Insured				Tenants All Risk Legal Liability
	Cross Liability/Severability				Host Liquor Liability
	Host Liquor Liability				Participants Liability Extension
	Participants Liability Extension				Personal/Advertising Injury Liability
HOMEOWNERS, CONDOMINIUM UNIT OWNERS, OR TENANTS PACKAGE POLICY					
B	Personal Liability				Third Party Liability
AUTOMOBILE LIABILITY					
C	All Owned & Leased Automobiles				Third Party Liability
UMBRELLA LIABILITY (Excess of CGL & Automobile)					
D	Occurrence Form				Bodily Injury & Property Damage
	Claims Made				(per occurrence)
	City of Lethbridge as Additional Insured				Annual Aggregate
OTHER (Please specify)					
E					Limit
					Deductible

The foregoing insurance shall be primary and shall not require the pro-rata sharing of any loss by the City of Lethbridge. These policies comply with the insurance requirements of the governing contract, permit or license with the City of Lethbridge and it is understood and agreed that the City of Lethbridge has been added as Additional Insured with respect to Commercial General Liability and Umbrella Liability policies.

SPECIAL EVENT DESCRIPTION (Including DATE & LOCATION)		
CERTIFICATE HOLDER	CANCELLATION	
CITY OF LETHBRIDGE 910 – 4 Avenue South Lethbridge, AB T1J 0P6	It is agreed that thirty (30) days written notice of any known material change or cancellation of any policies listed herein shall be given by the insurers to the City of Lethbridge.	
	Authorized Representative of the Insurers	Date (M/D/YY)