

(ON BROKER'S LETTERHEAD)  
 BROKER'S NAME HERE  
 MAILING ADDRESS HERE

**CERTIFICATE OF INSURANCE**

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 listed.

NAMED INSURED:  
 (I.E., PURCHASERS/ MOVERS/ RIGGERS)

NAMED AUCTION:  
 (NAME OF AUCTION)

NAMED LOCATION:  
 (AUCTION SITE ADDRESS)

COVERAGE	INSURER	POLICY NO.	POLICY TERM
COMMERCIAL GENERAL LIABILITY including cross liability & products & completed operations. Limits Of Liability: \$1,000,000 inclusive, bodily injury & property damage			

HOIST LIABILITY (if lifting or moving equipment to be done) Limits Of Liability: \$ 250,000 sub-limit per occurrence and in the aggregate			
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**CORPORATE ASSETS INC.,** is added as an Additional Insured, but only with respect to the operations of the Named Insured

COVERAGE	INSURER	POLICY NO.	POLICY TERM
AUTOMOBILE LIABILITY – OWNED/LONG TERM LEASED. Limits Of Liability: \$1,000,000 combined, bodily injury and property damage			

NON-OWNED AUTO Limits Of Liability: \$1,000,000. per occurrence			
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COMMERCIAL UMBRELLA LIABILITY Limits Of Liability: \$ 1,000,000 each occurrence and in the aggregate			
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WORKERS COMPENSATION & EMPLOYERS LIABILITY WC Statutory Limits <input type="checkbox"/> Other <input type="checkbox"/> Limits Of Liability: \$ /each accident \$ /disease - per employee \$ /disease – policy limit			
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This is to certify that the Policies of Insurance listed herein have been issued to the above named Insured and are in force at this time. 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, conditions and exclusions of this Policy.

Should these policies be cancelled before the expiration date thereof, the issuing company will endeavour to mail 30 days written notice of cancellation to the below named Certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind on the company.

**CERTIFICATE HOLDER:**  
**CORPORATE ASSETS INC.**  
**2 ST. CLAIR AVENUE WEST, SUITE 1002**  
**TORONTO, ONTARIO**  
**CANADA M4V 1L5**

Signed on behalf of the Insurers shown above

\_\_\_\_\_  
 Authorized Representative  
 BROKER'S NAME HERE

\_\_\_\_\_  
 Date