

CERTIFICATE OF LIABILITY INSURANCE

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
A & W Food Court 2268 - 4820 Kingsway	Grease Ducks Ltd 200 - 100 Park Royal
Burnaby, B.C. V5H 4N2	West Vancouver, B.C. V7T1A2

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES
(but only with respect to the operations of the Named Insured) Commercial Kitchen Cleaning, Degreasing and Fire Suppression System Services

4. COVERAGES

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				Commercial General Liability		
<input type="checkbox"/> Claims Made OR <input checked="" type="checkbox"/> Occurrence	Intact Insurance	2017/ 2 / 6	2018/ 2 / 6	Bodily Injury and Property Damage Liability - General Aggregate	1,000	5,000,000
<input checked="" type="checkbox"/> Products and/or completed operations				- Each Occurrence	1,000	5,000,000
<input type="checkbox"/> Employer's Liability				Products and Completed Operations Aggregate	1,000	5,000,000
<input type="checkbox"/> Cross Liability				<input type="checkbox"/> Personal Injury Liability	1,000	5,000,000
<input type="checkbox"/> Waiver of Subrogation				<input checked="" type="checkbox"/> Personal and Advertising Injury Liability	1,000	5,000,000
<input type="checkbox"/> Tenants Legal Liability				Medical Payments	1,000	10,000
<input type="checkbox"/> Pollution Liability Extension				Tenants Legal Liability	1,000	500,000
<input type="checkbox"/>				Pollution Liability Extension		
<input type="checkbox"/>						
<input type="checkbox"/> Non-Owned Automobiles				Non-Owned Automobile		
<input type="checkbox"/> Hired Automobiles				Hired Automobiles		
AUTOMOBILE LIABILITY				Bodily Injury and Property Damage Combined		1,000,000
<input type="checkbox"/> Described Automobiles	ICBC			Bodily Injury (Per Person)		
<input type="checkbox"/> All Owned Automobiles				Bodily Injury (Per Accident)		
<input type="checkbox"/> Leased Automobiles **				Property Damage		
** All Automobiles leased in excess of 30 days where the insured is required to provide insurance				Each Occurrence		
EXCESS LIABILITY				Aggregate		
<input type="checkbox"/> Umbrella Form						
<input type="checkbox"/>						
OTHER LIABILITY (SPECIFY)						
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						

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
iCare Insurance Brokers Ltd. #105 - 3790 Canada Way Burnaby, BC V5G 1G4	(Commercial general Liability - but only with respect to the operations of the Named Insured) Ivanhoe Cambridge Inc. & Ivanhoe Cambridge I Inc. & Ivanhoe Cambridge II Inc. & Ivanhoe Cambridge III Inc. & Greater Vancouver Water District #604 - 4720 Kingsway Burnaby, B.C. V5H4N2

8. CERTIFICATE AUTHORIZATION

Issuer	iCare Insurance Brokers Ltd.	Contact Number(s)		
Authorized Representative	Rick Myers	Type	No	Type
		Type Phone	No (604) 628-5177	Type Fax
Signature of Authorized Representative	X	Date	2017 2 21	EMail Address

CERTIFICATE OF LIABILITY INSURANCE

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
A & W Skytrain 2268 - 4820 Kingsway Burnaby, B.C. V5H 4N2	Grease Ducks Ltd 200 - 100 Park Royal West Vancouver, B.C. V7T1A2

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES	(but only with respect to the operations of the Named Insured)
Commercial Kitchen Cleaning, Degreasing and Fire Suppression System Services	

4. COVERAGES

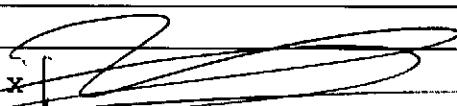
TYPE OF INSURANCE	INSURANCE COMPANY AND POLICY NUMBER	EFFECTIVE DATE YYYY/MM/DD	EXPIRY DATE YYYY/MM/DD	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)		
				COVERAGE	DED.	AMOUNT OF INSURANCE
COMMERCIAL GENERAL LIABILITY	Intact Insurance 5XL035174	2017/ 2 / 6	2018/ 2 / 6	Commercial General Liability		
<input type="checkbox"/> Claims Made OR <input checked="" type="checkbox"/> Occurrence				Bodily Injury and Property Damage Liability - General Aggregate	1,000	5,000,000
<input checked="" type="checkbox"/> Products and/or completed operations				- Each Occurrence	1,000	5,000,000
<input type="checkbox"/> Employer's Liability				Products and Completed Operations Aggregate	1,000	5,000,000
<input type="checkbox"/> Cross Liability				<input type="checkbox"/> Personal Injury Liability	1,000	5,000,000
<input type="checkbox"/> Waiver of Subrogation				<input checked="" type="checkbox"/> Personal and Advertising Injury Liability		
<input type="checkbox"/> Tenants Legal Liability				Medical Payments	1,000	10,000
<input type="checkbox"/> Pollution Liability Extension				Tenants Legal Liability	1,000	500,000
<input type="checkbox"/>				Pollution Liability Extension		
<input type="checkbox"/> Non-Owned Automobiles						
<input type="checkbox"/> Hired Automobiles				Non-Owned Automobile		
AUTOMOBILE LIABILITY	ICBC			Bodily Injury and Property Damage Combined		1,000,000
<input type="checkbox"/> Described Automobiles				Bodily Injury (Per Person)		
<input type="checkbox"/> All Owned Automobiles				Bodily Injury (Per Accident)		
<input type="checkbox"/> Leased Automobiles **				Property Damage		
** All Automobiles leased in excess of 30 days where the insured is required to provide Insurance				Each Occurrence		
EXCESS LIABILITY				Aggregate		
<input type="checkbox"/> Umbrella Form						
<input type="checkbox"/>						
OTHER LIABILITY (SPECIFY)						
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						

5. CANCELLATION

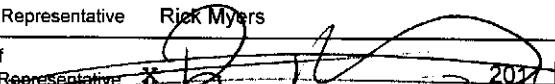
Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the certificate holder named above, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS	7. ADDITIONAL INSURED NAME AND MAILING ADDRESS (Commercial general Liability - but only with respect to the operations of the Named Insured)
iCare Insurance Brokers Ltd. #105 - 3790 Canada Way Burnaby, BC V5G 1G4 BROKER CLIENT ID: GRED01	Ivanhoe Cambridge Inc. & Ivanhoe Cambridge I Inc. & Ivanhoe Cambridge II Inc. & Ivanhoe Cambridge III Inc. & Greater Vancouver Water District #604 - 4720 Kingsway Burnaby, B.C. V5H4N2

8. CERTIFICATE AUTHORIZATION

Issuer	iCare Insurance Brokers Ltd.	Contact Number(s)		
Authorized Representative		Type	No	Type
Signature of Authorized Representative		Type Phone	No (604) 628-5177	Type Fax

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				
A & W Restaurant 14 - 601 Cordova Street Vancouver, B.C. V6B 1G1		Grease Ducks Ltd 200 - 100 Park Royal West Vancouver, B.C. V7T1A2				
3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)						
Commercial Kitchen Cleaning, Degreasing and Fire Suppression System Services						
4. COVERAGE						
<p>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 the terms, exclusions and conditions of such policies.</p> <p style="text-align: center;">LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS</p>						
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	Intact Insurance 5XL035174	2017/ 2 / 6	2018/ 2 / 6	Commercial General Liability Bodily Injury and Property Damage Liability - General Aggregate	1,000	5,000,000
				- Each Occurrence	1,000	5,000,000
				Products and Completed Operations Aggregate	1,000	5,000,000
				<input type="checkbox"/> Personal Injury Liability	1,000	5,000,000
				<input checked="" type="checkbox"/> Personal and Advertising Injury Liability		
				Medical Payments	1,000	10,000
				Tenants Legal Liability	1,000	500,000
				Pollution Liability Extension		
<input type="checkbox"/> Non-Owned Automobiles						
<input type="checkbox"/> Hired Automobiles						
AUTOMOBILE LIABILITY	ICBC			Bodily Injury and Property Damage Combined		1,000,000
				Bodily Injury (Per Person)		
				Bodily Injury (Per Accident)		
				Property Damage		
				** All Automobiles leased in excess of 30 days where the insured is required to provide insurance		
EXCESS LIABILITY				Each Occurrence		
				Aggregate		
OTHER LIABILITY (SPECIFY)						
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 (Commercial general Liability - but only with respect to the operations of the Named Insured)			
iCare Insurance Brokers Ltd. #105 - 3790 Canada Way Burnaby, BC V5G 1G4			The Cadillac Fairview Corporation Ltd 200 Granville Street, Suite 1020			
BROKER CLIENT ID: GRED01			Vancouver, B.C. V6C 1S4			
8. CERTIFICATE AUTHORIZATION						
Issuer	iCare Insurance Brokers Ltd.	Contact Number(s)				
Authorized Representative	Rick Myers	Type	No	Type	No	
Signature of Authorized Representative		Type Phone	No (604) 628-5177	Type Fax	No (604) 628-5179	
Date	EMail Address					
2017 2 23						

CERTIFICATE OF LIABILITY INSURANCE

This certificate does not amend, extend or alter the coverage afforded by the policies below.

1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS A & W Restaurant 14 - 601 Cordova Street Vancouver, B.C. V6B 1G1	2. INSURED'S FULL NAME AND MAILING ADDRESS Grease Ducks Ltd 200 - 100 Park Royal West Vancouver, B.C. V7T1A2
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3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured) Commercial Kitchen Cleaning, Degreasing and Fire Suppression System Services

4. COVERAGE

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				Commercial General Liability		
<input type="checkbox"/> Claims Made OR <input checked="" type="checkbox"/> Occurrence				Bodily Injury and Property Damage Liability - General Aggregate	1,000	5,000,000
<input checked="" type="checkbox"/> Products and/or completed operations				- Each Occurrence	1,000	5,000,000
<input type="checkbox"/> Employer's Liability				Products and Completed Operations Aggregate	1,000	5,000,000
<input type="checkbox"/> Cross Liability				<input type="checkbox"/> Personal Injury Liability	1,000	5,000,000
<input type="checkbox"/> Waiver of Subrogation				<input checked="" type="checkbox"/> Personal and Advertising Injury Liability		
<input type="checkbox"/> Tenants Legal Liability				Medical Payments	1,000	10,000
<input type="checkbox"/> Pollution Liability Extension				Tenants Legal Liability	1,000	500,000
<input type="checkbox"/>				Pollution Liability Extension		
<input type="checkbox"/>						
<input type="checkbox"/> Non-Owned Automobiles				Non-Owned Automobile		
<input type="checkbox"/> Hired Automobiles				Hired Automobiles		
AUTOMOBILE LIABILITY				Bodily Injury and Property Damage Combined		1,000,000
<input type="checkbox"/> Described Automobiles				Bodily Injury (Per Person)		
<input type="checkbox"/> All Owned Automobiles				Bodily Injury (Per Accident)		
<input type="checkbox"/> Leased Automobiles **				Property Damage		
** All Automobiles leased in excess of 30 days where the insured is required to provide insurance				Each Occurrence		
				Aggregate		
EXCESS LIABILITY						
<input type="checkbox"/> Umbrella Form						
<input type="checkbox"/>						
OTHER LIABILITY (SPECIFY)						
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						

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6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS iCare Insurance Brokers Ltd. #105 - 3790 Canada Way Burnaby, BC V5G 1G4	7. ADDITIONAL INSURED NAME AND MAILING ADDRESS (Commercial general Liability - but only with respect to the operations of the Named Insured) Ontrea Inc. 200 Granville Street, Suite 1020 Vancouver, B.C. V6C 1S4
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8. CERTIFICATE AUTHORIZATION

Issuer iCare Insurance Brokers Ltd.	Contact Number(s) Type No Type Phone No (604) 628-5177
Authorized Representative Rick Myers	Type Fax No (604) 628-5179
Signature of Authorized Representative X	Date 2017 2 23 EMail Address