



CERTIFICATE OF LIABILITY INSURANCE

This certificate is issued as a matter of information only and confers no rights upon the certificate holder and imposes no liability on the insurer.
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	
Bass Pro Shops Canada Inc. Bass Pro, Inc., Bass Pro Outdoor World, L.P., BPS Catalog, L.P., Sportsman's Distribution Company, Richard Shaw Company Sportsman's Specialty Group, Inc., TrackMar Corporation, Tracker Marine, L.P.,		Grease Ducks Ltd. 200 - 100 Park Royal West Vancouver, B.C. V7T 1A2	

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)			

4. COVERAGES			
---------------------	--	--	--

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policies period indicated notwithstanding any requirement, 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.

LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

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						
<input type="checkbox"/> Claims Made OR <input checked="" type="checkbox"/> Occurrence	Intact Insurance 5XL035174A	2016/ 2 / 6	2017/ 2 / 6	Commercial General Liability		
<input checked="" type="checkbox"/> Products and/or completed operations				Bodily Injury and Property Damage	1,000	5,000,000
<input type="checkbox"/> Employer's Liability				Liability - General Aggregate	1,000	5,000,000
<input type="checkbox"/> Cross Liability				- Each Occurrence	1,000	5,000,000
<input type="checkbox"/> Tenants Legal Liability				Products and Completed Operations Aggregate	1,000	5,000,000
<input type="checkbox"/> Pollution Liability Extension				<input type="checkbox"/> Personal Injury Liability	1,000	5,000,000
<input type="checkbox"/> Non-Owned Automobiles				<input checked="" type="checkbox"/> Personal and Advertising Injury Liability	1,000	5,000,000
<input type="checkbox"/> Hired Automobiles				Medical Payments	1,000	10,000
				Tenants Legal Liability	1,000	500,000
				Pollution Liability Extension		
AUTOMOBILE LIABILITY						
<input type="checkbox"/> Described Automobiles	ICBC			Bodily Injury and Property Damage Combined		1,000,000
<input type="checkbox"/> All Owned Automobiles				Bodily Injury (Per Person)		
<input type="checkbox"/> Leased Automobiles **				Bodily Injury (Per Accident)		
<input type="checkbox"/> ** All Automobiles leased in excess of 30 days where the insured is required to provide insurance				Property Damage		
EXCESS LIABILITY						
<input type="checkbox"/> Umbrella Form				Each Occurrence		
<input type="checkbox"/> 				Aggregate		
OTHER LIABILITY (SPECIFY)						
<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 (but only with respect to the operations of the Named Insured)			
iCare Insurance Brokers Ltd. #105 - 3790 Canada Way Burnaby, BC V5G 1G4		Dogwood Canyon Nature Park Company, Sportsman's Park L.P., B.T. Aviation, L.P., Bass Pro Trademarks, L.P., Big Cedar, L.P. and Three Johns Company			
BROKER CLIENT ID: GRED01					

8. CERTIFICATE AUTHORIZATION					
Issuer	iCare Insurance Brokers Ltd.	Contact Number(s)			
Authorized Representative	<i>Tony Siracusa</i>	Type	No	Type	No
		Type Phone	No (604) 628-5177	Type Fax	No (604) 628-5179
Signature of Authorized Representative	<i>Tony Siracusa</i>	Certificate Date		Email Address	
		2016	9	1	