# CERTIFICATE OF INSURANCE

ISSUE DATE (YY/MM/DD)
25/09/25

**BROKER**
Acera Insurance Services Ltd.
1331 Macleod Trail SE #800
Calgary AB T2G 0K3

**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.**

COMPANY **A** Intact Insurance Company

**INSURED'S FULL NAME AND MAILING ADDRESS**
HKS Construction Ltd.
106 - 200 Lincoln Way SW
Calgary AB T3E 7G7

COMPANY **B**

COMPANY **C**

COMPANY **D**

COMPANY **E**

## 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 (CGL) Including, but not limited to: Bodily Injury, Property Damage, Cross Liability and Severability of Interest Clauses, Contractual Liability, SEF 94, SEF 96, SEF 99. | A | 50123QL7C | 25/10/04 | 26/10/04 | Per Occurrence | 2,000,000 |
| | | | | | Prod & Comp Operation | 2,000,000 |
| | | | | | Personal & Advertising Inj | 2,000,000 |
| | | | | | Non-Owned Auto - SPF 6 | 2,000,000 |
| | | | | | Tenant's Legal Liability | 500,000 |

**DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS/ADDITIONAL INSURED**
Operations: Roofing Contractor

**CERTIFICATE HOLDER**

To whom it may concern

**CANCELLATION**
This certificate is issued as a matter of information only and confers no rights on the holder, and imposes no liability on the insurer.

**AUTHORIZED REPRESENTATIVE**