

CSIO CERTIFICATE OF INSURANCE

DATE (YY/MM/DD)
10/11/18

BROKER

Safety Insurance

538 Main Street, Unit 1
Hartland, NB

E7P 2N5

BROKER'S CLIENT ID: BULKC-2

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.

COMPANIES AFFORDING COVERAGE

COMPANY A **Markel Insurance**

COMPANY B

COMPANY C

COMPANY D

INSURED'S FULL NAME AND MAILING ADDRESS

Bulk Carriers (PE) Ltd
John F Kelly
PO Box 153
Cornwall, PE E0A 1H0

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 <input type="checkbox"/> CLAIMS MADE OR <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND /OR COMPLETED OPERATIONS <input type="checkbox"/> EMPLOYERS'S LIABILITY <input checked="" type="checkbox"/> CROSS LIABILITY <input type="checkbox"/> TENANT'S LEGAL LIABILITY <input checked="" type="checkbox"/> NON-OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> POLLUTION LIABILITY EXTENSION	A	2010390	10/11/30	11/11/30	EACH OCCURRENCE	\$ 500000
					GENERAL AGGREGATE	\$ 500000
					PRODUCTS - COMP/OP AGG	\$ Included
					PERSONAL INJURY	\$ Included
					TENANT'S LEGAL LIABILITY	\$ 200000
					MED EXP (Any one person)	\$
					NON-OWNED AUTO	\$ 500000
					OPTIONAL POLLUTION LIABILITY EXTENSION	\$
					(Per Occurrence)	\$
					(Aggregate)	\$
AUTOMOBILE LIABILITY <input type="checkbox"/> DESCRIBED AUTOMOBILES <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> LEASED AUTOMOBILES SEF#27-Non-Ownd Veh SEF#5-Permission to	A	\$150,000 LIMIT RENT/LEASE INCLUDED	10/11/30	11/11/30	BODILY INJURY PROPERTY DAMAGE COMBINED	\$ 500000
					BODILY INJURY (Per person)	\$ INCLUDED
					BODILY INJURY (Per accident)	\$ INCLUDED
					PROPERTY DAMAGE	\$ INCLUDED
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM (Specify)					EACH OCCURRENCE	\$
					AGGREGATE	\$
OTHER LIABILITY (SPECIFY) Cargo	A	2010390	10/11/30	11/11/30	Cargo-All Risk Reefer Bkdn Warranty \$5,000 Deductible	500,000 Included

ADDITIONAL INSURED

DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS
ALL LIMITS IN CANADIAN FUNDS. Reefer Breakdown Warranty is included. SEF#5 Permission to Rent/Lease Included.

CERTIFICATE HOLDER

Bulk Carriers (PE) Ltd.

Mike
PO Box 153
Cornwall, PE C0A 1H0

CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 15 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

SIGNATURE OF AUTHORIZED REPRESENTATIVE

PRINT NAME INCLUDING POSITION HELD

Carolyn Reid, CAIB Commercial Dept- (Fleet)

FAX NUMBER
506-375-4232

EMAIL ADDRESS

COMPANY
Safety Insurance Services

DATE
10/11/18

CSIO CERT (6/00)