Certificate of Insurance

Facility Rental

Form 2751 - Fillable (Rev. 2020 04)

City of Mississauga Legal Services, Risk Management 300 City Centre Drive Mississauga, Ontario, L5B 3C1



This Form must be completed, if not purchasing insurance through the City, in order to book any City property or facility.

Insured Information				
Named Insured				
Address of Insured				Postal Code
Telephone No.	nail Address			
General Liability Insurance Coverage (coverage only	accepted by I	nsurers	who are licensed in Ontario	and governed by FSCO)
Name of Insurance Company				
Policy No. Eff	ective From 2	022	Expiry	
Description of Activity/Event/Use				
Location(s) and/or Name of City Facility				
Location(s) and/or realine or only racinity				
Start Date (including set-up if any)		End Date (include tear down if any)		
, , , , , , , , , , , , , , , , , , , ,			`	
This is to certify the above Named Insured holds insu	urance covei	rage for	the above activity as follo	ws (check applicable boxes):
-		ugo ioi		no (<u>onosk appnousio sexee</u>).
Commercial General Liability Limit per Occurrence	\$2,000,000 (all other activity	ties)	\$10,000,000 (Festivals, Parades, High Risk	Sports, or as indicated under contract)
Aggregate Limit \$	Umbrel	la Liabili	ty Limit \$	
			LOCATIONS INCLUDED:	
Coverage Above MUST Include:				830 Paisley Blvd W, Mississauga, ON L5C 3
Third Party Bodily Injury and Property Damage		Yes		300 Erin Centre Blvd, Mississauga, ON L5M
Products & Completed Operations		Yes		Centre & Sports Park: 5320 Ninth Line,
Owners and Contractors Protective Liability		Yes	Mississauga, ON L5M 0R5 Meadowyale Community Centre	e: 6655 Glen Erin Dr, Mississauga, ON L5N 3
Cross Liability/Severability of Interests Clause Employees &/or Volunteers added as Additional Insureds		Yes	Clarkson Community Centre: 2475 Truscott Dr, Mississauga, ON L5J 2B5 Cawthra Community Centre: 1399 Cawthra Road Mississauga L5G 4L1	
		Yes		
Answer below, ONLY if applicable:				Centre: 1275 Mississauga Valley Blvd L5A 3
If Event includes Sport Activity - Bodily Injury to Participant		Yes	No	amir Crescent Mississauga L5C 1L1
		Yes	No	
- Participant to Participant				
If Event includes Vendors - Independent Blanket Vendor coverage		Yes	No	
If Event includes the serving of Alcohol - Liquor Liability		Yes	No	
It is understood and agreed that this policy includes ADDIT				•
Named Insured as follows; 1) The Corporation of the City of				
Insured is/are solely responsible for any deductible(s) or Se	elf-insured Ret	ention(s) within the Insurance indicate	ed above.
Other Additional Insureds:				
0.455-45-4				
Certification	1-)		and the second second second second	
This is to certify that the policy or certificate (including end undersigned to the Named Insured above and is in full force				
period of coverage as stated herein so as to affect this cert				
to: City of Mississauga, Risk Management - Proof of Insura				
Dated this day of , , , , , , , , , , , ,) at		,	, Canada
Authorized Penresentative A/A/				
Authorized Representative Mauyer	/			
Authorized	Official - Signature	and Stamp		
Name of Broker				
Address of Draker			Desides	Doots! Code
Address of Broker			Province	Postal Code