



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			
À qui de droit		9007-6720 Québec inc FASRS Transcol inc. 3495 de la Recherche Street			
		Jonquière		Quebec	
		POSTAL CODE		POSTAL CODE	G7X 0H5

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

4. 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 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 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 <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input type="checkbox"/> EMPLOYER'S LIABILITY <input checked="" type="checkbox"/> CROSS LIABILITY <input type="checkbox"/> WAIVER OF SUBROGATION <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION <input checked="" type="checkbox"/> RC des garagistes <input type="checkbox"/>	Northbridge Assurance - CBC 0716197	2023/03/01	2024/03/01	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE	\$1,000			
						- EACH OCCURRENCE		\$3,000,000
						PRODUCTS AND COMPLETED OPERATIONS AGGREGATE		\$3,000,000
						<input type="checkbox"/> PERSONAL INJURY LIABILITY OR <input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY		\$3,000,000
						MEDICAL PAYMENTS		\$25,000
						TENANTS LEGAL LIABILITY	\$1,000	\$500,000
						POLLUTION LIABILITY EXTENSION		
						par accident		\$3,000,000
<input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES	Northbridge Assurance - CBC	2023/03/01	2024/03/01	NON-OWNED AUTOMOBILES		\$3,000,000		
<input checked="" type="checkbox"/> HIRED AUTOMOBILES	Northbridge Assurance - CBC	2023/03/01	2024/03/01	HIRED AUTOMOBILES				
AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> DESCRIBED AUTOMOBILES <input type="checkbox"/> ALL OWNED AUTOMOBILES <input checked="" type="checkbox"/> LEASED AUTOMOBILES ** ** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE	Northbridge Assurance - CBC 0716197	2023/03/01	2024/03/01	BODILY INJURY AND PROPERTY DAMAGE COMBINED		\$2,000,000		
						BODILY INJURY (PER PERSON)		
						BODILY INJURY (PER ACCIDENT)		
						PROPERTY DAMAGE		
						EACH OCCURRENCE		
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>				AGGREGATE				
OTHER LIABILITY (SPECIFY) <input checked="" type="checkbox"/> Cargo	Northbridge Assurance - CBC 0716197	2023/03/01	2024/03/01		\$5,000	\$500,000		
<input checked="" type="checkbox"/> FAQ 27	Northbridge Assurance - CBC	2023/03/01	2024/03/01	Dommages aux véhicules	\$10,000	\$150,000		

5. CANCELLATION

En cas de résiliation de l'un des contrats mentionnés avant la date d'échéance spécifiée, l'assureur émetteur de la police se propose de donner au titulaire un préavis écrit de 30 jours mais ne saurait s'y engager. À défaut d'envoi de ce préavis, la compagnie se dégage de toute obligation ou responsabilité de tout genre à la compagnie, ses agents ou représentants.

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)			
Lussier 1270 Wallberg Boulevard C.P. 50007					
Dolbeau-Mistassini	QC	POSTAL CODE	G8L 6B7		
BROKER CLIENT ID: 1135207				POSTAL CODE	

8. CERTIFICATE AUTHORIZATION					
ISSUER Lussier	AUTHORIZED REPRESENTATIVE Kathie Martel		CONTACT NUMBER(S) TYPE Téléphone NO. +1 (877) 587-7437	TYPE Télécopieur NO. (418) 276-8673	
			TYPE NO.	TYPE NO.	
SIGNATURE OF AUTHORIZED REPRESENTATIVE <i>Kathie Martel</i>		DATE February 28, 2023	EMAIL ADDRESS kmartel@lussier.co		