



# 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		
The Corporation of the City of Peterborough			Ontario Artistic Swimming and Member Clubs		
500 George Street N			1460 The Queensway, Unit M142		
Peterborough ON			Etobicoke ON		
POSTAL CODE K9H 3R9			POSTAL CODE M8Z 1S4		

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

Provincial Artistic Swimming Sanctioned Activities  
Exclusions Included: Virus, Bacteria, Disease And Contagion Exclusion; Total Liquor and Marijuana Liability Exclusion  
Participant Liability Included  
Insurer: Certain Lloyd's Underwriters under contract MKL2025001  
See Attached...

**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
<b>COMMERCIAL GENERAL LIABILITY</b>  <input type="checkbox"/> CLAIMS MADE <b>OR</b> <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input checked="" 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 type="checkbox"/>	Certain Underwriters at Lloyd's of London CAS945491-01	2025/04/01	2026/04/01	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE		
				- EACH OCCURRENCE	1,000	10,000,000
				PRODUCTS AND COMPLETED OPERATIONS AGGREGATE		10,000,000
				<input type="checkbox"/> PERSONAL INJURY LIABILITY OR <input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY		10,000,000
				MEDICAL PAYMENTS		5,000
				TENANTS LEGAL LIABILITY	1,000	250,000
				POLLUTION LIABILITY EXTENSION		
<input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES <input checked="" type="checkbox"/> HIRED AUTOMOBILES	Certain Underwriters at Lloyd's of London CAS945491-01	2025/04/01	2026/04/01	NON-OWNED AUTOMOBILES HIRED AUTOMOBILES	1,000	5,000,000 50,000
<b>AUTOMOBILE LIABILITY</b>  <input type="checkbox"/> DESCRIBED AUTOMOBILES <input type="checkbox"/> ALL OWNED AUTOMOBILES <input type="checkbox"/> LEASED AUTOMOBILES ** ** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE				BODILY INJURY AND PROPERTY DAMAGE COMBINED		
				BODILY INJURY (PER PERSON)		
				BODILY INJURY (PER ACCIDENT)		
				PROPERTY DAMAGE		
<b>EXCESS LIABILITY</b>  <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>				EACH OCCURRENCE		
				AGGREGATE		
<b>OTHER LIABILITY (SPECIFY)</b> <input checked="" type="checkbox"/> Abuse Coverage	Certain Underwriters at Lloyd's of London CAS945491-01	2025/04/01	2026/04/01	Abuse Coverage	5,000	500,000
<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 (Commercial General Liability- but only with respect to the operations of the Named Insured)		
Arthur J. Gallagher Canada Limited			The Corporation of the City of Peterborough		
435 McNeilly Road, Suite 203			500 George Street N		
Stoney Creek ON					
POSTAL CODE L8E 5E3					
BROKER CLIENT ID:			Peterborough	ON	POSTAL CODE K9H 3R9

8. CERTIFICATE AUTHORIZATION					
ISSUER Arthur J. Gallagher Canada Limited			CONTACT NUMBER(S)		
AUTHORIZED REPRESENTATIVE Jason Jansson			TYPE Phone	NO. 905-575-1122	TYPE NO.
			TYPE Fax	NO. 905-643-8321	TYPE NO.
SIGNATURE OF AUTHORIZED REPRESENTATIVE			DATE 2025/05/20 EMAIL ADDRESS Kara_Glauser@ajg.com		

### DESCRIPTIONS Continued.

Re: Kawartha Artistic Swimming, End of year banquet. Awards ceremony. Pizza, Non-Alcoholic Drinks, Cake. Will be held indoors at McDonnel Street Community Center, 577 McDonnel St, Peterborough, ON K9H 2Y1 on May 25, 2025

The Corporation of the City of Peterborough is added as an additional insured to the Commercial General Liability Coverage Policy, but only with respect to liability arising out of operations carried out by or on behalf of the Named Insured, excluding any automobile liability.

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavour to mail 30 days written notice to the certificate holder named below. Failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.