

# CERTIFICATE OF INSURANCE – FARM LIABILITY

DATE : 27/Jul/2010

Certificate Issued To:

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This does not amend, extend or alter the coverage afforded by the policies below..

AGENT or BROKER

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Insured:

Certificate Holder as Above

## COVERAGES

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policies period indicated, notwithstanding any requirements, terms 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	Policy Number	Effective Date (DD/MMM/YYYY)	Expiry Date (DD/MMM/YYYY)	Limits	
<b>Personal / Farm Liability</b> (Occurrence Based)  <b>Checked Boxes Show Coverage In Policy</b>  <input type="checkbox"/> Personal Liability <input type="checkbox"/> Farm Liability <input type="checkbox"/> Products and Completed Operations <input type="checkbox"/> Personal Tenants Legal Liability <input type="checkbox"/> Non Owned Automobile				Each Occurrence	\$
				Aggregate Limit	\$
				Voluntary Medical Payments	\$2,000
				Voluntary Payment For Damage To Property	\$500
				Non Owned Automobile	\$
<b>Pollution Liability</b>  <input type="checkbox"/> Farmer's Limited Pollution Liability (Claims Made)				Each Occurrence	\$
				Aggregate Limit	\$
<b>Umbrella Liability Policy</b>  <input type="checkbox"/> Umbrella Liability Policy				Each Occurrence	\$
<b>Other - Describe in Remarks</b>					\$

Each of the following Endorsements limits the coverage of the above policy'(s)

- 1.
- 2.
- 3.
- 4.

Remarks

## INSURER

## CANCELLATION

INSERT YOUR COMPANY NAME, ADDRESS ETC. HERE

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavour to mail 15 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.

Authorized Representative:

Date: / /