

PRINCE EDWARD ISLAND STANDARD GARAGE AUTOMOBILE CERTIFICATE OF INSURANCE
PE-S.P.F. No. 4

Policy No. _____

Insurance Company ("The Insurer")	<input type="checkbox"/> Company Bill <input type="checkbox"/> Agency Bill / Broker Bill Other	Replacing Policy No. ▶
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Item	1. Insured's Full Name and Business Address (including county or district)	Agent/Broker	Code(s)	Agent/Broker Use Only Applicant's Tel #s
	Postal Code: _____		Postal Code: _____	

	INDICATE BLDG. LOT	
LOCATION OF PREMISES WHERE BUSINESS IS CONDUCTED (SHOW EACH BUILDING AND LOT SEPARATELY.)		
(A) _____		
(B) _____		
(C) _____		
(D) _____		

2. Policy Period	Time	a.m.	p.m.	Date	Date	All times are local times at the applicant's postal address as stated.
From		<input type="checkbox"/>	<input type="checkbox"/>	YYYY MM DD	To 12:01 a.m. YYYY MM DD	

3. THE AUTOMOBILES IN RESPECT OF WHICH INSURANCE IS TO BE PROVIDED ARE THOSE USED IN CONNECTION WITH THE APPLICANT'S BUSINESS OF:

(SPECIFY WHETHER AUTOMOBILE DEALER, REPAIR GARAGE, SERVICE STATION, STORAGE GARAGE OR PARKING LOT AND DESCRIBE ALL OTHER BUSINESS, IN RESPECT OF WHICH INSURANCE IS TO BE PROVIDED, CONDUCTED BY THE APPLICANT AT THE LOCATIONS SPECIFIED IN ITEM 1) NOTE: THIS FORM SHOULD NOT BE USED FOR RENTAL OR LEASING EXPOSURES.

4. THE BASIS OF RATING AND CALCULATION OF THE PREMIUM PAYABLE SHALL BE IN ACCORDANCE WITH THE PREMIUM COMPUTATION STATEMENT ATTACHED (PE-P.C.S. No.1).	FULL TIME	PART TIME
ESTIMATED TOTAL PAYROLL FOR POLICY PERIOD \$ _____	NUMBER OF EMPLOYEES INCLUDING PROPRIETORS, PARTNERS AND EXECUTIVE OFFICERS AT THE EFFECTIVE DATE OF THE POLICY:	

5. THIS POLICY PROVIDES FOR INSURANCE AGAINST ONE OR MORE OF THE PERILS MENTIONED IN THIS ITEM, BUT ONLY FOR INSURANCE UNDER THE SECTION(S) OR SUBSECTION(S) FOR WHICH A PREMIUM IS SPECIFIED IN THIS ITEM AND NO OTHER AND UPON THE TERMS, CONDITIONS, PROVISIONS, DEFINITIONS AND EXCLUSIONS OF THE INSURER'S CORRESPONDING STANDARD GARAGE AUTOMOBILE POLICY FORM AND FOR THE FOLLOWING SPECIFIED LIMITS AND AMOUNTS:

INSURING AGREEMENTS	PERILS	LIMITS AND AMOUNTS	ADVANCE PREMIUM
SECTION A THIRD PARTY LIABILITY	LEGAL LIABILITY FOR BODILY INJURY TO OR DEATH OF ANY PERSON OR DAMAGE TO PROPERTY (EXCLUSIVE OF COSTS AND POST JUDGMENT INTEREST) FOR LOSS OR DAMAGE RESULTING FROM BODILY INJURY TO OR THE DEATH OF ONE OR MORE PERSONS, AND FOR LOSS OR DAMAGE TO PROPERTY, REGARDLESS OF THE NUMBER OF CLAIMS ARISING FROM ANY ONE ACCIDENT.	\$ _____ (EXCLUSIVE OF COSTS AND POST JUDGMENT INTEREST) FOR LOSS OR DAMAGE RESULTING FROM BODILY INJURY TO OR THE DEATH OF ONE OR MORE PERSONS AND FOR LOSS OR DAMAGE TO PROPERTY, REGARDLESS OF THE NUMBER OF CLAIMS ARISING FROM ANY ONE ACCIDENT.	BI \$ _____ PD \$ _____
SECTION A.1 DIRECT COMPENSATION - PROPERTY DAMAGE	THIS POLICY CONTAINS A PARTIAL PAYMENT OF RECOVERY CLAUSE FOR PROPERTY DAMAGE IF A DEDUCTIBLE IS SPECIFIED FOR DIRECT COMPENSATION - PROPERTY DAMAGE.	DED \$ _____	\$ _____
SECTION B MANDATORY ACCIDENT BENEFITS	MANDATORY MEDICAL AND REHABILITATION BENEFITS, AND ACCIDENT BENEFITS IN MOTOR VEHICLE LIABILITY POLICIES	AS STATED IN SECTION B OF THE POLICY	\$ _____
SECTION C LOSS OF OR DAMAGE TO OWNED AUTOMOBILES	1 COLLISION OR UPSET	ACTUAL CASH VALUE AT TIME OF LOSS OR DAMAGE NOT EXCEEDING THE ACTUAL COST TO THE INSURED	SUM PAYABLE BY INSURED IN RESPECT OF EACH SEPARATE AUTOMOBILE \$ _____
THE PREMIUM UNDER SUBSECTION 2, 3 AND 4 SHALL BE COMPUTED ON A: MONTHLY AVERAGE BASIS <input type="checkbox"/> OR CO-INSURANCE BASIS <input type="checkbox"/> OR OTHER <input type="checkbox"/>			

INSURING AGREEMENTS	PERILS		LIMITS AND AMOUNTS			ADVANCE PREMIUM
			LOCATION AS PER ITEM 1	SUBSECTIONS INSURED	*LIMIT OF LIABILITY	
SECTION C LOSS OF OR DAMAGE TO OWNED AUTOMOBILES	2	COMPREHENSIVE (EXCLUDING COLLISION OR UPSET AND OPEN LOT PILFERAGE)	(A)		\$	\$
	3	SPECIFIED PERILS (EXCLUDING OPEN LOT PILFERAGE)	(B)		\$	\$
			(C)		\$	\$
	4	SPECIFIED PERILS (EXCLUDING THEFT)	(D)		\$	\$
	* IN RESPECT OF EACH AUTOMOBILE, THE ACTUAL CASH VALUE AT THE TIME OF LOSS OR DAMAGE NOT EXCEEDING THE ACTUAL COST TO THE INSURED AND SUBJECT TO THAT LIMIT FOR EACH AUTOMOBILE: (A) THE AMOUNT OF INSURANCE STATED IN THE MONTHLY REPORT, IF ANY; OR (B) THE LIMIT OF INSURANCE STATED HEREIN TO BE APPLICABLE TO EACH SPECIFIED LOCATION FOR LOSS OR DAMAGE FROM ANY ONE OCCURRENCE AT EACH SPECIFIED LOCATION.					
SECTION D UNINSURED AUTOMOBILE COVERAGE	PROTECTION AGAINST UNINSURED AUTOMOBILE COVERAGE		AS STATED IN SECTION D OF THE POLICY			\$
SECTION E LEGAL LIABILITY FOR DAMAGE TO CUSTOMERS' AUTOMOBILES WHILE IN THE CARE, CUSTODY OR CONTROL OF THE INSURED	1	COLLISION OR UPSET	\$	(EXCLUSIVE OF COSTS AND POST JUDGMENT INTEREST) ANY ONE CUSTOMER'S AUTOMOBILE	SUM PAYABLE BY INSURED IN RESPECT OF \$ EACH SEPARATE OCCURRENCE	\$
	2	SPECIFIED PERILS (EXCLUDING OPEN LOT PILFERAGE)	(A)	MAXIMUM NUMBER OF CUSTOMERS' AUTOMOBILES	LIMIT OF LIABILITY (EXCLUSIVE OF COSTS AND POST JUDGMENT INTEREST) ANY ONE OCCURRENCE	
			(B)		\$	
			(C)		\$	
			(D)		\$	\$
ENDORSEMENTS						\$
MINIMUM RETAINED PREMIUM \$			THE ADVANCE PREMIUMS ARE SUBJECT TO THE ADJUSTABLE PREMIUM COMPUTATION PROVISION IN THE POLICY		TOTAL ADVANCE PREMIUM	\$
STATE NAME AND ADDRESS OF LIENHOLDER OR MORTGAGEE TO WHOM, JOINTLY WITH THE APPLICANT, LOSS, IF ANY, UNDER SECTION C IS PAYABLE AS THEIR INTERESTS MAY APPEAR						
6. ALL THE STATEMENTS IN THIS CERTIFICATE ARE TRUE AND THE INSURED HEREBY APPLIES FOR A CONTRACT OF AUTOMOBILE INSURANCE TO BE BASED ON THE TRUTH OF THE SAID STATEMENTS.						
WARNING: THE INSURANCE ACT PROVIDES THAT –						
Where (a) an Applicant for a contract, (i) gives false particulars of the described automobile to be insured to the prejudice of the Insurer, or (ii) knowingly misrepresents or fails to disclose in the application any fact required to be stated therein; or (b) the Insured contravenes a term of the contract or commits a fraud; or (c) the Insured willfully makes a false statement in respect of a claim under the contract, a claim by the Insured is invalid and the right of the Insured to recover indemnity is forfeited.						
DATE:	IN WITNESS WHEREOF, THE INSURER HAS EXECUTED AND ATTESTED THESE PRESENTS BUT THIS CERTIFICATE SHALL NOT BE VALID UNLESS COUNTERSIGNED BY A DULY AUTHORIZED REPRESENTATIVE OF THE INSURER.					
_____ _____ _____	_____ AUTHORIZED REPRESENTATIVE			_____ (SIGNATURE)		