



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	
Woodlands Phase 1 Co-Tenancy Deerpark Mgt. Limited David Duncan 52-5450 Canotek Road Ottawa, ON		Woodlands Phase I Co-Tenancy c/o Deerpark Mgt. Limited. 52-5450 Canotek Road Ottawa, ON	
	POSTAL CODE K1J 9G3		POSTAL CODE K1J 9G3

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)
Sheds, Fences and Landscaping jointly owned by the Association including Sewers & Watermains, Roads and Fire Lane that are owned by the Co-Tenancy.

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 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 type="checkbox"/> CROSS LIABILITY <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION <input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES AUTOMOBILE LIABILITY <input type="checkbox"/> DESCRIBED AUTOMOBILES <input type="checkbox"/> ALL OWNED AUTOMOBILES <input type="checkbox"/> LEASED AUTOMOBILES ** <small>** ALL AUTOMOBILES LEASED IN EXCESS OF 90 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE</small> <input type="checkbox"/> EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>	AVIVA Canada Inc. 81710945	19/10/31	20/10/31	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE - EACH OCCURRENCE PRODUCTS AND COMPLETED OPERATIONS AGGREGATE <input type="checkbox"/> PERSONAL INJURY LIABILITY OR <input type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY MEDICAL PAYMENTS TENANTS LEGAL LIABILITY POLLUTION LIABILITY EXTENSION NON OWNED AUTOMOBILE	1000 1000 1000 25000 1000	5000000 5000000 5000000 500000
OTHER LIABILITY (SPECIFY) <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	AVIVA Canada Inc. 81710945 AVIVA Canada Inc. 81710945	19/10/31 19/10/31	20/10/31 20/10/31	Directors & Officers Liab Misc Property Floater	500000 500000	

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 (but only with respect to the operations of the Named Insured)
Gifford Carr Ottawa West 100 Terence Matthews Crescent Ottawa, ON	
POSTAL CODE K2M 1P7	

8. BROKER CLIENT ID: WOODL-5	POSTAL CODE
9. CERTIFICATE AUTHORIZATION	
ISSUER Gifford Carr Insurance Group	CONTACT NUMBER(S)
AUTHORIZED REPRESENTATIVE Trish Watson	TYPE NO. TYPE NO. TYPE NO.

SIGNATURE OF AUTHORIZED REPRESENTATIVE *Trish Watson* DATE **19/11/07** EMAIL ADDRESS