



**Wawanesa**  
Insurance

**COMMERCIAL INSURANCE  
POLICY**

**DECLARATIONS**

New Policy effective  
**Sep 01, 2021**

Supersedes any previous declaration bearing  
the same policy number for this policy period

**NAMED INSURED AND ADDRESS**

1319763 BC LTD  
504-1111 BARCLAY ST  
VANCOUVER BC V6E 1G9

**BROKER OFFICE**

**CENTRAL AGENCIES LTD**  
502-6339 200 ST  
LANGLEY BC V2Y 1A2  
Telephone: 604-276-0244 **Broker Number: 0102302**  
Fax: 604-276-0236  
Email: office@brokerbc.ca  
Website: https://centralagenciesltd.com

<b>Policy Number</b> 38238410	<b>Account Number</b> 68162331	<b>Policy Period</b> From Sep 01, 2021 to Sep 01, 2022 12:01 A.M.	All times are local at the Named Insured's postal address as stated herein
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**Named Insured(s):** 1319763 BC LTD, O/A Ideal Siding Abbotsford

**Form of Organization :** Corporation

**COMMERCIAL INSURANCE POLICY**

**Description of the Business and Operations of the Named Insured(s):** Siding Contractor

**This policy is subject to the Common Policy and Property Conditions** - Form WA2999 08 2021; Statutory Conditions (British Columbia) - Form SC2 08 2021. It includes the CEO Signature page Form WA2990 08 2018.

**Your full term premium is \$1,364.00.** Refer to the breakdown of premiums below.

**Policy Summary**

<b>Premium Subtotal for Commercial Liability</b>	<b>\$1,364.00</b>
<b>Total Policy Premium</b>	<b>\$1,364.00</b>

**Additional Policy Documents Included with this package**

Broad Form Completed Operations (Form WA6014 11 2019), Commercial General Liability Coverage Form (Form WA6000 06 2019), Communicable Disease Exclusion Form (Form WA6095 03 2021), Common Policy and Property Conditions (Form WA2999 08 2021), CEO signature Page - CPCEOSIGN (Form WA2990 08 2018), Commercial Property Policy Declarations (Form CPDEC), Communicable Disease (General Liability) Policy Holder Notice (Form PH1597-1 11 2020), Statutory Conditions (British Columbia) (Form SC2 08 2021)

<b>Commercial Liability</b>	<b>Amount of Insurance</b>	<b>Deductible</b>	<b>Premium</b>
<b>Commercial General Liability Coverage Form</b> - Form WA6000 06 2019			<b>\$1,187.00</b>
General Aggregate	\$5,000,000		
Products-Completed Operations Aggregate	\$2,000,000		
Each Occurrence	\$2,000,000		
Personal and Advertising Injury Liability	\$2,000,000		\$12.00
Medical Payments - Any One Person	\$10,000		\$50.00
Tenants' Legal Liability	\$300,000		\$115.00
Deductible - Bodily Injury Liability, Per Occurrence basis		\$1,000	
Deductible - Property Damage Liability, Per Occurrence basis			
<b>Broad Form Completed Operations</b> - Form WA6014 11 2019			
<b>Communicable Disease Exclusion Form</b> - Form WA6095 03 2021			Included
<b>Premium Subtotal for Commercial Liability</b>			<b>\$1,364.00</b>

**This policy contains a clause which may limit the amount payable.**

"Wawanesa Insurance" is **The Wawanesa Mutual Insurance Company** and is the licensed insurer of this policy.