



## CERTIFICATE OF INSURANCE

**INSURER** (Name and Address) **XL Specialty Insurance Company** 100 King St. West, Suite 3020, Toronto, ON M5X 1C9

**BROKER** (Name and Address): **HUB International HKMB Limited** 595 Bay Street, Suite 900, Toronto, ON M5G 2E3

**INSURED** (Name and Address): **10141135 Canada Inc. / 6088139 Canada Ltd. / Bartek Inspections / Bartnicki Inspections /**

(Name of Inspector): **Karol Bartnicki**

(Address): **2280 rue Yearling Saint-Lazare, Qc J7T 3L7**

**CERTIFICATE HOLDER:** **InterNACHI – International Association of Certified Home Inspectors**

### GUARANTEES

This document certifies that the insurance policies listed below were issued to the Insured named above for the coverage period indicated. This Certificate of Insurance does not amend or extend the warranty covered by the policy referred to below.

Insured	Type of Insurance	Policy Number	Effective Date (MM-DD-YYYY)	Expiry Date (MM-DD-YYYY)	Coverage Limit (In Canadian Dollars)	
YES	<b>Professional Liability</b>  (Errors and Omissions)	CIP0000417  (REF #:INTER062)	11/1/2022	11/1/2023	Per Claim	\$1,000,000
					Per Policy Term	\$2,000,000
					Retroactive Date	5/7/2014
					Deductible	\$2,500
YES	<b>Commercial General Liability</b>	CA00011608LI20A  (REF #:INTER062)	11/1/2022	11/1/2023	Per Claim	\$1,000,000
					Per Policy Term	\$2,000,000
					Deductible	\$1,000

### **CANCELLATION OR NON-RENEWAL**

In the event of a **cancellation or non-renewal** of the above mentioned contract before the specified due date, the insurer will send a **written notice to the Certificate Holder with 30 days notice.**

This notice must be accompanied by written proof demonstrating that such a written notice was also sent to the Insured.

Note that the holder of this certificate assumes no obligation or liability of any kind to the Insured and the insurer or broker and their agents or representatives.

**Date :** 19 octobre 2022  
By the authorized representative of the insurer

**Michael Gilles**  
Vice-President, Partner  
Vice-Président, Partenaire  
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(Name and Title)

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