

Clowns Canada

Commercial General Liability Policy Exclusive To Association Members

Hub International Ontario Ltd.

Name of Applicant:	Association Number:
Mailing Address:	Phone:
Policy Period: From mm dd yy To mm dd yy	
Exclusively: (at 12:01 Standard Time at the address of the Named Insured herein).	

Current Insurer: _____ Policy Number: _____ Expiry: _____
 Does the Applicant have other insurance?
 Any losses during the past 3 years? If yes, Describe:
 Do you use any henna products?
 Has the Company cancelled or refused insurance during the past 3 years?
 If yes, give reasons:

Coverage	Limit	Deductible
Coverage A. Personal injury and Property Damage: Products/Complete Operations Hazard:	\$2,000,000 \$2,000,000 Aggregate Limit	\$2500 each occurrence
Coverage B. Advertising Injury Liability	\$2,000,000	\$5000 per occurrence
Coverage C. Medical Expenses:	\$25,000 any one person	
Coverage D. Tenants Legal Liability:	\$250,000	\$500 per occurrence
Non-owned Automobile Liability:	\$2,000,000 each occurrence	
Contents:	p\$ 5000 / \$75.00 (\$81.00 Incl. Tax)	p\$10,000 / \$150.00 (\$162.00 Incl. Tax)

Business Operations

Owners, directors, partners, salesmen, and office employees;
 Number: _____ Total Annual Renumeration \$ _____

List and description of operations: _____
 Number of Employees: _____ Payroll: _____ Total Annual Receipts: _____

Annual Policy Premium \$150 Total with 8% tax (where applicable) is \$162.00

Return Application and Cheque Payable to Hub International Ontario Ltd.

3063 Walker Rd, Windsor, Ontario, N8W 3R4

Contact: Stephanie Martinson (519) 972-7500 Ext 223 email: stephanie.martinson@hubinternational.com

Toll Free (800) 563-9441 Fax (519) 966-6177

Signature of Insured: _____ Signature of Broker _____ Date: ____/____/____

Coverage Commences When Payment Processed By Hub International Ontario Limited
 Certificate of Insurance will be forwarded.