

**CERTIFICATE OF AUTOMOBILE INSURANCE (ONTARIO)
ECONOMICAL MUTUAL INSURANCE COMPANY**

HEAD OFFICE
WATERLOO
ONTARIO
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economical

This is your Certificate of Automobile Insurance. Contact your Broker/Agent with any questions or if you require clarification regarding your coverage choices.

AGENCY OR BROKER	8414 SILL50 JOSSLIN INSURANCE BROKERS LTD. TEL. 519-893-7008	25-05-2018 DATE PREPARED	REPLACING POLICY NO.	C 6611038 POLICY NO.
INSURED'S NAME	SILVER LAKE MENNONITE CAMP INC. 50 KENT AVE KITCHENER ON N2G 3R1	AUTO NO.	(A) LESSOR(S) (OPCF 5) (B) LIENHOLDER(S) (OPCF 29A) TO WHOM LOSS MAY BE JOINTLY PAYABLE NAME, ADDRESS AND POSTAL CODE	
POLICY EFFECTIVE DATE	DAY MO. YR. 28 05 2018	POLICY EXPIRY DATE	DAY MO. YR. 28 05 2019 12.01 A.M.	ALL TIMES ARE LOCAL TIMES AT THE NAMED INSURED'S PRIMARY ADDRESS SHOWN ON THIS CERTIFICATE
AUTO NO.	VEHICLE CODE	DESCRIBED AUTOMOBILES	REG. NO.	PLATE NO.
1	03850	2011 FORD TRUCK/VAN RANGER SPORT SUPERCAB 2	1FTKR4EE7BPA48194	
2	97101	1990 FORD TRUCK/VAN RANGER XL SUPERCAB 2WD	1FTCR14T7LPA77120	
INSURANCE COVERAGES				
LIABILITY	Limit	Premium	Limit	Premium
BODILY INJURY	2,000,000	261	2,000,000	334
PROPERTY DAMAGE	INCLUSIVE	INCL.	INCLUSIVE	INCL.
ACCIDENT BENEFITS (STANDARD BENEFITS)	As Stated in Section 4 of Policy	173	As Stated in Section 4 of Policy	506
OPTIONAL INCREASED ACCIDENT BENEFITS	up to \$ per week		up to \$ per week	
Income Replacement (\$600/\$800/\$1,000)				
Medical, Rehabilitation & Attendant Care (\$130,000)				
Medical, Rehabilitation & Attendant Care (\$1,000,000)				
Optional Catastrophic Impairment (additional \$1,000,000 added to Standard Benefit or Optional Medical, Rehabilitation & Attendant Care Benefit)				
Caregiver, Housekeeping & Home Maintenance				
Death & Funeral				
Dependant Care				
Indexation Benefit (Consumer Price Index)				
UNINSURED AUTOMOBILE	As Stated in Section 5 of Policy	17	As Stated in Section 5 of Policy	11
DIRECT COMPENSATION - PROPERTY DAMAGE	Deductible	157	Deductible	26
This policy contains partial payment of recovery clause for property damage if a deductible is specified for direct compensation-property damage.				
LOSS OR DAMAGE	Deductible	Premium	Deductible	Premium
This policy contains a partial payment of loss clause. A deductible applies for each claim except as stated in your policy.	1000	209		
ALL PERILS				
COLLISION OR UPSET				
COMPREHENSIVE } EXCLUDING				
SPECIFIED PERILS } COLLISION OR UPSET				
OPCF 44R FAMILY PROTECTION COVERAGE	2,000,000	24	2,000,000	43
PREMIUM SUBTOTALS		\$841		\$920
POLICY CHANGE TERMS (OPCF No. and Name, showing limit if applicable)				OPCF PREMIUM
1	OPCF 20 COVERAGE FOR TRANSPORTATION REPLACEMENT - TOTAL LIMIT \$1500			32
2	SEASONAL SNOW PLOWING - NO			
Total Policy Premium	\$1,761			FOR THIS RENEWAL R
METHOD OF PAYMENT	- SEE ATTACHED INVOICE			Non-Refundable Premium

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RATING INFORMATION

C 6611038

Policy No.

DRIVER NO.	Driver Name		Age	Marital Status	Yrs Lic.	Driver's Training	Assignment Auto No.				Convictions		
	Last Name	Given Names					Principal	Secondary	Occasional	Excluded	Serious	Major	Minor
1	ERB	DAVID	40	MAR	24		1						
1	ERB	DAVID	40	MAR	24		2						
2	RUBY	LAURA	22	SGL	5			1					
2	RUBY	LAURA	22	SGL	5			2					
3	CORNIES	KAREN	47	SGL	31			1					
3	CORNIES	KAREN	47	SGL	31			2					
4	FALK	LEVI	23	SGL	7			1					

AUTO NO.	Chargeable Claims as Indicated (X)				Surcharges		Discounts	
	Date of Loss Day Month Year	Liability - Bodily injury and/or Property Damage	Accident Benefits	Collision/ All Perils	%	Description	%	Description
1	07 01 2016			X				RENEWAL DISCOUNT
1	26 04 2015			X				CONVICTION FREE DISC
1	20 01 2015		X	X				
1	19 09 2014			X				
1	14 10 2011			X				
2						UNDERAGE OCCASIONAL		LOYALTY DISCOUNT
2								MULTI-VEHICLE

AUTO NO.	Kilometres Driven		Gross Vehicle Weight Rating (Commercial vehicles only)	Class Description	
	Annually	To Work 1-Way		Class	Description

AUTO NO.	Driving Record					Rate Group			Rating Territory	
	BI	PD	AB	DCPD/	COLL/	AB	DCPD/	SP/	Terr.	Description
				AP	AP		AP	COMP	Code	

This Certificate is proof of a contract of insurance between the Named Insured and the Insurer subject in all respects to the Ontario Automobile Policy (OAP1). In return for the premium charged and the statements contained in the Application, the contract provides the coverage outlined in this Certificate. You only have particular coverage for a specific automobile if this Certificate shows a premium for it, or shows the coverage is provided at no cost. All other terms of the Policy remain the same unless stated otherwise in this Certificate. Your Insurer will provide you with a copy of the Policy if you request it. This Certificate is only valid if it is signed by an authorized representative of the Insurer.


PRESIDENT AND CHIEF EXECUTIVE OFFICER

This certificate contains important information about your automobile insurance. For purposes of the Insurance Companies Act (Canada), this document was issued in the course of the Insurer's insurance business in Canada.

RATING INFORMATION

C 6611038
Policy No.

DRIVER NO.	Driver Name		Age	Marital Status	Yrs Lic.	Driver's Training	Assignment Auto No.				Convictions			
	Last Name	Given Names					Principal	Secondary	Occasional	Excluded	Serious	Major	Minor	
4	FALK	LEVI	23	SGL	7			2						
5	CALDWELL	REBEKAH	40	SGL	17			1						
5	CALDWELL	REBEKAH	40	SGL	17			2						
6	BORN	MICHAEL	21	SGL	4			1						
6	BORN	MICHAEL	21	SGL	4			2						
7	ROGALSKI	EDGAR	78	MAR	30			1						
7	ROGALSKI	EDGAR	78	MAR	30			2						
8	CORNIES	RONALD	52	MAR	36			1						
8	CORNIES	RONALD	52	MAR	36			2						
9	MACGREGOR,	ROBERT	C 21	SGL	3			1						3
9	MACGREGOR,	ROBERT	C 21	SGL	3			2						3

AUTO NO.	Chargeable Claims as indicated (X)				Surcharges		Discounts	
	Date of Loss Day Month Year	Liability - Bodily Injury and/or Property Damage	Accident Benefits	Collision/ All Perils	%	Description	%	Description
2								CONVICTION FREE DISC

AUTO NO.	Kilometres Driven		Gross Vehicle Weight Rating (Commercial vehicles only)	Class Description	
	Annually	To Work 1-Way		Class	Description
1	16000	5	3000	03	BUSINESS < 4,800 KMS
2	NOT AVAIL.			36	ALL COMMERCIAL AUTOMOBILES NOT SPECIFICALLY CLASSIFIED

AUTO NO.	Driving Record					Rate Group			Rating Territory	
	BI	PD	AB	DCPD/ COLL/ AP	COLL/ AP	AB	DCPD/ COLL/ AP	SP/ COMP	Terr. Code	Description
1	9	9	9	9	9	24	29	19	79	SOUTH WESTERN ONTARIO AND LAKE HURON AREAS
2	6	6	6	6	6		3	3	6A	

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