

Insurer

# Certificate of Automobile Insurance (Ontario)

**This is your Certificate of Automobile Insurance. Contact your Broker/Agent with any questions or if you require clarification regarding your coverage choices. All times are local times at the Named Insured's postal address shown on this Certificate.**

Policy Number	Policy Effective Date    year   month   day	Policy Expiry Date    year   month   day <b>12:01 a.m.</b>
Date Prepared	Broker/Agent	Telephone Number
Named Insured		Lessor (if applicable)

Described Automobiles	Automobile #	Automobile #
Model Year and Make		
Model and Body Type		
Serial No./V.I.N.		
Cylinders/C.C.		
Purchase Price/List Price New		

Insurance Coverages	Automobile #	Automobile #				
<b>Liability</b>	<b>Limit</b>	<b>Premium</b>	<b>Premium for Occasional Driver</b>	<b>Limit</b>	<b>Premium</b>	<b>Premium for Occasional Driver</b>
Bodily Injury						
Property Damage						
<b>Accident Benefits (Standard Benefits)</b>	As stated in Section 4 of Policy			As stated in Section 4 of Policy		
<b>Optional Increased Accident Benefits</b>	<b>Limit</b>	<b>Premium</b>	<b>Premium for Occasional Driver</b>	<b>Limit</b>	<b>Premium</b>	<b>Premium for Occasional Driver</b>
Income Replacement (\$600/\$800/\$1,000)	(up to \$ per week)			(up to \$ per week)		
Caregiver, Housekeeping & Home Maintenance	As stated in Section 4 of Policy			As stated in Section 4 of Policy		
Medical & Rehabilitation (\$100,000)						
Attendant Care (\$72,000)						
Medical, Rehabilitation (\$1,100,000) & Attendant Care (\$1,072,000)						
Death & Funeral						
Dependant Care						
Indexation Benefit (Consumer Price Index)						
<b>Uninsured Automobile</b>	As stated in Section 5 of Policy			As stated in Section 5 of Policy		
<b>Direct Compensation - Property Damage*</b>	<b>Deductible</b>	<b>Premium</b>	<b>Premium for Occasional Driver</b>	<b>Deductible</b>	<b>Premium</b>	<b>Premium for Occasional Driver</b>
*This policy contains a partial payment of recovery clause for property damage if a deductible is specified for direct compensation-property damage.						
<b>Loss or Damage**</b>	<b>Deductible</b>	<b>Premium</b>	<b>Premium for Occasional Driver</b>	<b>Deductible</b>	<b>Premium</b>	<b>Premium for Occasional Driver</b>
Specified Perils (excluding Collision or Upset)						
Comprehensive (excluding Collision or Upset)						
Collision or Upset						
All Perils						

**\*\* This policy contains a partial payment of loss clause. A deductible applies for each claim except as stated in your policy.**

Insurance Coverages (continued)	Automobile #	Automobile #
Policy Change Forms (Name, No., including limit if applicable)	Premium	Premium
<input style="width:100%; height:40px;" type="text"/>	<input style="width:100%; height:40px;" type="text"/>	<input style="width:100%; height:40px;" type="text"/>
<input style="width:100%; height:40px;" type="text"/>	<input style="width:100%; height:40px;" type="text"/>	<input style="width:100%; height:40px;" type="text"/>
	Occasional driver subtotals	Occasional driver subtotals
	<input style="width:100%; height:20px;" type="text"/>	<input style="width:100%; height:20px;" type="text"/>
Premium Subtotals	<input style="width:100%; height:20px;" type="text"/>	<input style="width:100%; height:20px;" type="text"/>
*Total Premium for each Automobile	<input style="width:100%; height:20px;" type="text"/>	<input style="width:100%; height:20px;" type="text"/>
*Premium Subtotal + Occasional driver subtotal	<input style="width:100%; height:20px;" type="text"/>	<input style="width:100%; height:20px;" type="text"/>
	Total Policy Premium	
	(Total Premium for Automobile 1 + Total Premium for Automobile 2)	
	<input style="width:100%; height:20px;" type="text"/>	
Minimum Non-Refundable Premium	<input style="width:100%; height:20px;" type="text"/>	
	Tax	
	<input style="width:100%; height:20px;" type="text"/>	Total Policy Cost
		<input style="width:100%; height:20px;" type="text"/>

Rating Information						Assignment to Auto				Convictions		
Driver No.	Driver Name	Age	Marital Status	Years Lic.	Driver's Training	Principal	Secondary	Occasional	Excluded	Serious	Major	Minor
Chargeable Claims					Surcharges				Discounts			
Auto No.	Date (yyyy/mm/dd)	BI	PD	AB	COLL/AP	%	Description		%	Description		
Kilometres Driven				Gross Vehicle Weight Rating (commercial vehicles only)	Class Description							
Auto No.	Annually	To Work (One Way)			Class	Description						
Driving Record					Vehicle Code	Rate Group				Rating Territory		
Auto No.	BI	PD	AB	DCPD		COLL/AP	AB	DCPD	COLL/AP	COMP/SP	Terr. Code	Description

Lienholders	
(to whom loss may be jointly payable)	(to whom loss may be jointly payable)

Method of Payment				
Type of Payment Plan	Total Policy Premium	Tax	Interest	Total Payable
Amount Paid with Application	Amount Still Due	No. of Remaining Instalments	Amount of Each Instalment	Instalment Due Date

Remarks

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 (OAP 1). 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 a 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.

Authorized Signature of Insurer:
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For purposes of the Insurance Companies Act (Canada), this document was issued in the course of the Insurer's insurance business in Canada.

**This is a brief explanation of the insurance outlined in this Certificate.**

### **Liability**

Provides coverage for you or other insured persons if someone else is killed or injured or their property is damaged in an automobile incident. It will pay for legitimate claims against you or other insured persons up to the limit of your coverage, and the cost of settling claims.

### **Accident Benefits**

Your insurance company is obligated to explain details of Accident Benefits coverage to you.

Provides benefits that you and other insured persons are entitled to receive if injured or killed in an automobile accident. These benefits may include: income replacement for persons who have lost income; payments to non-earners who suffer complete inability to carry on a normal life; payment of medical, rehabilitation and attendant care expenses; payment of certain other expenses; payment of funeral expenses and payments to survivors of a person who is killed. You may also purchase optional benefits to increase the standard level of benefits provided in the policy. The optional benefits your insurance company must offer are: increased income replacement; caregiver, housekeeping and home maintenance; increased medical and rehabilitation; increased attendant care; increased medical, rehabilitation and attendant care; increased death and funeral; dependant care; and an indexation benefit.

### **Uninsured Automobile**

Provides coverage if you or other insured persons are injured or killed by an uninsured motorist or by a hit-and-run driver. It covers damage to your automobile and its contents caused by an identified uninsured motorist.

### **Direct Compensation - Property Damage**

Provides coverage in Ontario, under certain conditions, for damage to your automobile and to property it is carrying, when another motorist is responsible. It is called Direct Compensation because you will collect from us, your insurance company, even though you are not at fault for the accident. There may be a deductible amount, and this amount is either paid by you toward the cost of repairs or is deducted from the loss settlement. Higher deductibles may reduce your premium.

### **Loss or Damage**

Provides a selection of optional coverages for your own automobile. Payments cover direct and accidental loss of, or damage to, a described automobile and its equipment. There is usually a deductible amount indicated for each coverage and this amount is either paid by you toward the cost of repairs or is deducted from the loss settlement. Higher deductibles may reduce your premium. There are four types of coverages:

- **Specified Perils:** Covers the described automobile against loss or damage caused by certain specific perils. They are: fire; theft or attempted theft; lightning; windstorm; hail or rising water; earthquake; explosion; riot or civil disturbance; falling or forced landing of aircraft or parts of aircraft; or the stranding, sinking, burning, derailment or collision of any kind of transport in or upon which the described automobile is being transported.
- **Comprehensive:** Covers a described automobile against loss or damage other than those covered by Collision or Upset, including perils listed under Specified Perils, falling or flying objects, missiles and vandalism.
- **Collision or Upset:** Covers damage when a described automobile is involved in a collision with another object or tips over.
- **All Perils:** Combines the Collision or Upset and Comprehensive coverages.

**Warning: The Insurance Act provides that where (a) an Applicant for a contract, (i) gives false particulars of the described automobile to be insured to the prejudice of the Insurer, or (ii) knowingly misrepresents or fails to disclose in the application any fact required to be stated therein; or (b) the Insured contravenes a term of the contract or commits a fraud; or (c) the Insured wilfully makes a false statement in respect of a claim under the contract, a claim by the Insured, for other than such statutory accident benefits as are set out in the Statutory Accident Benefits Schedule, is invalid and the right of the Insured to recover indemnity is forfeited.**

#### **Warning – Offences**

It is an offence under the Insurance Act to knowingly make a false or misleading statement or representation to an Insurer in connection with the person's entitlement to a benefit under a contract of insurance, or to wilfully fail to inform the Insurer of a material change in circumstances within 14 days, in connection with such entitlement. The offence is punishable on conviction by a maximum fine of \$100,000 for the first offence and a maximum fine of \$200,000 for any subsequent conviction.

It is an offence under the federal Criminal Code for anyone to knowingly make or use a false document with the intent it be acted on as genuine and the offence is punishable, on conviction, by a maximum of 10 years imprisonment.

It is an offence under the federal Criminal Code for anyone, by deceit, falsehood or other dishonest act, to defraud or to attempt to defraud an insurance company. The offence is punishable, on conviction, by a maximum of 10 years imprisonment for cases involving an amount over \$5,000 or otherwise a maximum of 2 years imprisonment.

This Certificate contains important information about your automobile insurance.