

Building Development Services

315 King Street West, Chatham ON, N7M 5K8

RIGHT OF ENTRY INSURANCE **REQUIREMENTS**

In accordance with Section 132 of the Municipal Act, 2001, the owner or authorized occupant for whom this application is being made must provide proof that he or she has liability insurance for at least the period covering the estimate time of the proposed work on the adjoining lands and for any claims made against them arising from the proposed work, or that the contractor conducting the work has such insurance.

Proof of insurance shall consist of a certificate of insurance completed by the owner's or the contractor's insurance company (see the back of this page).

Despite compliance with this insurance provision, by signing below the owner or authorized occupant, for whom this application is being made, also acknowledges that the owner or authorized occupant or the contractor, as the case may be, is still required to hold the owner of the adjoining land harmless in the event of any damages to people or property as a result of anything done by the owner or his or her contractor on the adjoining land to the extent allowable by law.

Signed on:	
(Date)	(Please print name of Owner or Authorized occupant)
	(Signature of owner or authorized occupant)

The personal information on this form is collected under the authority of Section 132 of the Municipal Act, 2001. The information is collected to ensure compliance with insurance requirements. Questions about this collection can be directed in writing to the Chief Building Official, Building Development Services, Civic Centre, 315 King Street West, P.O. Box 640, Chatham, Ontario, N7M 5K8 or by Telephone at (519) 360-1998.

RIGHT OF ENTRY CERTIFICATE OF INSURANCE

(To be completed by the insurer or its representative)

1. Name of Insured		2. Address of Insured	
3. Insurance Details			
a) Insuring Company	b) Policy Number	c) Effective date	d) Expiry date
e) Policy Limits (per occur	rence, minimum limit to be e	evidenced- \$1,000,000.00)	
4. Policy Provisions/ Ame	ndments/ Endorsements		
,	be in force, when work beir		ant takes place on the
b) The insurance policy in 3 insurance available to the p	B (b), above, is to apply as persons in 4 (a), above.	rimary insurance and not in	n excess to any other
,	o reduce the coverage in 3 mail is to be provided by th ing address:	• •	
	Municipality of C	hatham-Kent	
	315 King Street V	Vest, Box 640	
	Chatham, Ontai		
	Attention: Buildin	g Department	
<u>CERTIFICATION</u>			
Certificate for and on bel	s in effect as stated in this Chalf of the insurer identified at 3 (d) unless notice is provide	above. This Certificate is va	alid until the expiration
(Brokers Name)	(Broker's Ad	dress) (Broker	's Telephone Number)
(Date)		(Signature of Certifying Official)	
		(Stamp of Cer	tifving Official)