CERTIFICATE OF INSURANCE

FOOD AND SAMPLING OPERATIONS

(To Be Completed Only By the Insurer or its Representative)

1. NAME OF INSURED	2. ADDRESS & TELEPHONE NO. OF INSURED

3. Operations of the Named Insured for which this Certificate is issued:

4. COMMERCIAL GENERAL LIABILITY (Minimum limit – $2,000,000 per Occurrence, defence costs outside limit)

A. Insuring Company	B. Policy Number	C. Policy Limit(s)	D. Effective Date	E. Expiry Date

5. POLICY PROVISIONS/AMENDMENTS/ENDORSEMENTS

A. Commercial General Liability is extended to include Personal Injury Liability, Broad Form Contractual Liability, Owner's and Contractor's Protective Coverage, Products and Completed Operations and Contingent Employers Liability.

B. The Board of Governors of Exhibition Place, City of Toronto, O&Y/SMG Canada and Servomation Inc., their respective directors, officers and employees have been named as Additional Insured but only with respect to liability arising out of the operations of the Named Insured for which an Agreement has been issued.

C. The Commercial General Liability Policy(ies) (as identified above) shall protect each insured in the same manner and to the same extent as though a separate policy has been issued to each, but nothing shall operate to increase the Limits of Liability as identified above beyond the amount or amounts for which the Company would be liable if there had been only one insured.

D. The Commercial General Liability Policy(ies) identified above shall apply as primary insurance and not excess to any other insurance available to any of the Additional Insured as set out in Item 5B.

E. If cancelled or changed to reduce the coverage as outlined on this Certificate during the period of coverage as stated herein, thirty (30) days, (ten (10) days if cancellation is due to non-payment of premium), prior written notice by registered mail will be given by the Insurer(s) to Board of Governors of Exhibition Place and ServoCanada, c/o DIRECT ENERGY CENTRE, 100 PRINCES' BLVD., EXHIBITION PLACE, TORONTO, ONTARIO M6K 3C3, TO THE ATTENTION OF THE GENERAL MANAGER OF THE DIRECT ENERGY CENTRE.

CERTIFICATION

I certify that the insurance is in effect as stated in this Certificate and that I have authorization to issue this Certificate for and on behalf of the Insurer(s) indicated above. This Certificate is valid until the expiration date(s) shown in Item 4 unless notice is given in writing in accordance with Item 5E.

DATE	BROKER'S NAME AND ADDRESS	SIGNATURE AND STAMP OF CERTIFYING OFFICIAL