



4586 DECARIE BOULEVARD LIMITED PARTNERSHIP  
335B-4950 CH QUEEN-MARY  
MONTREAL QC H3W 1X3

Montréal, July 13, 2021

**Subject: Modification(s) to your commercial insurance policy**  
**Policy No.: 028165718**

Hello,

Thank you for entrusting us with your insurance needs!

Enclosed is your updated insurance policy, which reflects the modifications we agreed to. These modifications will come into force on the effective date that appears on the enclosed Coverage Summary Page of your insurance policy.

We recommend you familiarize yourself with all the documents enclosed in this mailing. **Please carefully read the payment or debit notice, since it includes the details on paying your premium.** If you are eligible for a credit, you will receive a cheque in the next few days after the modifications go into force.

Also, rest assured that in the event of a loss, you can contact L'Unique's emergency services at any time at 1 800 463 4800.

We're here for you, and we'll do everything to ensure the personalized service you receive meets your expectations. Feel free to contact us if you have any questions or need some advice!

We appreciate your business.

Sincerely,

Agence d'assurance Ofshitzer

Assurance Ofshitzer  
5262 Westbury Avenue  
Montreal, Quebec H3W 2W3  
Phone: (514) 486-3479 Fax: (514) 486-2079  
info@ofshitzer.com



**INSURED (NAME AND POSTAL ADDRESS)**

4586 DECARIE BOULEVARD LIMITED PARTNERSHIP  
335B-4950 CH QUEEN-MARY  
MONTRÉAL QC H3W 1X3

**Billing method :** INSTALMENT PLAN (12 PAYMENTS)  
**Date of notice :** 2021/07/13

**YOUR INSURANCE BROKER**

(Your broker is paid on a commission basis and may charge professional fees)

AGENCE D'ASSURANCE OFSHITZER INC  
5262 AV DE WESTBURY , MONTRÉAL QC H3W 2W3

(13050)  
(514) 486-3479

**STATEMENT OF ACCOUNT**

Transactions summary					
Date	Object	Premium (\$)			
2021/02/25	New policy	24 818.00			
2021/06/23	Modification	-2 495.00			
2021/07/12	Modification	-2 427.00			
Payments received					
Date	Object	Service charge (\$)	Sales tax (\$)	Broker's fees	Premium (\$)
2021/07/13	Amount perceived	-310.20	-930.70	0.00	-10 340.80
(Excluding fees and sales tax)				<b>BALANCE</b>	<b>9 555.20</b>

\$ 19,896

**SCHEDULE OF MONTHLY PAYMENTS**

**Revision of schedule of deductions**

Your monthly payments have been modified and premiums will be automatically deducted from your bank account according to the following schedule:

Date of deductions	Premium (\$)	Service charge (\$)	Sales tax (\$)	Broker's fees (\$)	Monthly instalment (\$)
* 2021/03/18	2 068.16	62.04	186.14	125.00	2 441.34
* 2021/03/28	2 068.16	62.04	186.14	0.00	2 316.34
* 2021/04/28	2 068.16	62.04	186.14	0.00	2 316.34
* 2021/05/28	2 068.16	62.04	186.14	0.00	2 316.34
* 2021/06/28	2 068.16	62.04	186.14	0.00	2 316.34
2021/07/28	1 365.02	40.95	122.86	0.00	1 528.83
2021/08/28	1 365.02	40.95	122.86	0.00	1 528.83
2021/09/28	1 365.02	40.95	122.86	0.00	1 528.83
2021/10/28	1 365.02	40.95	122.86	0.00	1 528.83
2021/11/28	1 365.02	40.95	122.86	0.00	1 528.83
2021/12/28	1 365.02	40.95	122.86	0.00	1 528.83
2022/01/28	1 365.08	40.95	122.86	0.00	1 528.89

An asterisk (\*) preceding an instalment date indicates that payment for that instalment has been collected



**DECLARATIONS**

POLICY

**INSURED (NAME AND POSTAL ADDRESS)**

4586 DECARIE BOULEVARD LIMITED PARTNERSHIP  
335B-4950 CH QUEEN-MARY  
MONTRÉAL QC H3W 1X3

**YOUR INSURANCE BROKER**

AGENCE D'ASSURANCE OFSHITZER INC (13050)  
5262 AV DE WESTBURY , MONTRÉAL QC H3W 2W3 (514) 486-3479

**POLICY PERIOD**

From 2021/02/28\* To 2022/02/28\* exclusively (\* 12:01 AM standard time at the named insured as stated herein)

**TRANSACTION TYPE**

Effective date

Correction of premium 2021/07/12  
Correction of the deductible Year/Month/Day

**POLICY PREMIUM(S)**

		Premium billed(\$):	-2 427
		Policy premium for the period	-2 427
		Total premium(\$):	-2 427

*SUBJECT TO THE GENERAL CONDITIONS AND SPECIFIC AGREEMENTS - A 0110*



**- ADDRESS - OCCUPANCY - COVERAGES - LOCATION 1 \***

Address : 4586 BOUL DÉCARIE, MONTRÉAL QC H3X 2H5  
Insured's business : Building owner 35 units

Coverage	Form No.	Co-insurance	Deductible (\$)	Amount (\$)	Premium (\$)
<b>PROPERTY INSURANCE</b>					
* Building - Broad Form	B1000.03	90	5 000	5 000 000	included
* Contents of all kinds - Broad Form	B1000.03	90	5 000	150 000	included
* Replacement cost - Building and equipment	B1340.01			included	included
* Property on loan or on rental on the insured premises	B1015.01			included	included
* Sewer Back-up	B1360.02		10 000	included	included
* Earthquake	B1370.02		5 %	included	included
Deductible 5%, minimum 100 000\$					
* Flood	B1380.02		25 000	included	included
* Water damage deductible - Water heater restriction	B1420.01		10 000	included	included
* Business Owners Signature – Enhanced Advantage	B1505.05		5 000	included	included
<b>BUSINESS INTERRUPTION INSURANCE</b>					
* Extended Rental Income - Broad Form	E2020.01	100		550 000	included



## MULTI-COVERAGE BUSINESS INSURANCE

Transaction : Endorsement

Policy Number: 028165718 01.03

Coverage	Form No.	Co-insurance	Deductible (\$)	Amount (\$)	Premium (\$)
<b>GENERAL LIABILITY INSURANCE</b>					
* Coverage A - B - C GENERAL AGGREGATE LIMIT per insurance period	R4000.04		1 000	5 000 000	included
* Coverage A - C Bodily Injury and Property Damage Liability - Each occurrence Limit	R4000.04		1 000	5 000 000	included
* Products - Completed Operations - Aggregate Limit per insurance period	R4000.04		1 000	5 000 000	included
* Coverage B Personal and Advertising Injury Liability - Any one person or organization	R4000.04			5 000 000	included
* Coverage C Medical Payments - Any one Person	R4000.04			2 500	included
* Coverage D Tenants' Legal Liability - Any one premises	R4000.04		1 000	100 000	included
* Non-owned Form - Q.P.F. No. 6	R4015.01			5 000 000	included
* Elevator collision	R4020.01		1 000	2 500	included
* Exclusion - other insurance	R4330.01			included	included
<b>EQUIPMENT BREAKDOWN INSURANCE</b>					
* Equipment Breakdown	M5000.05		5 000	included	included
<b>MISCELLANEOUS</b>					
* Interpretation errors of digital data exclusion	D6000.03				included
* Fungi and fungal derivatives exclusion	D6010.03				included
* Act of terrorism exclusion	D6020.02				included
* General exclusion - Privacy breach	D6040.01				included
* Microorganism and communicable disease endorsement	D6060.01				included
				<b>Total</b>	<b>-2 427</b>

**CREDITOR(S)/LESSOR(S)** *Loss, if any, payable to :*

BANQUE DE MONTRÉAL (Creditor)  
119 RUE SAINT-JACQUES, MONTRÉAL QC H2Y 1L6  
Building - Broad Form

Yves Gagnon

VP and Chief Operating Officer

The symbol \* beside the text means that there was an addition, modification or cancellation