

Section A: To be completed by the person requesting the certificate

1. Condominium corporation name

2. Name of person requesting the certificate

3. Contact information of the person requesting the certificate

Number	Street Name	Apartment/Unit Number	Postal Code
City	Territory/Province		P.O. Box Number
Phone	Email	Fax Number	

4. The person making the request is the

- ☐ Owner of unit no. _____
- ☐ Purchaser of unit no. _____
- ☐ Mortgagee of unit no. _____

5. Check one or both boxes as applicable

- ☐ Mail a paper copy of the certificate to the address provided
- ☐ Send an electronic copy of the certificate to the email address provided

Section B: To be completed by the condominium corporation and returned within 10 days of receiving the request

The corporation certifies that it has a policy of insurance as required under the *Condominium Act, 2015*.

6. As requested, a copy of the Certificate of Insurance (check all that apply)

- ☐ is attached to this certificate
- ☐ will be forwarded to the email address provided

7. The corporation certifies that the information provided in this certificate is correct as of (date) YYYY / MM / DD

Name and title of authorized signatory	Signature of authorized signatory
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Note: The maximum fee a condominium corporation may charge for a Certificate of Insurance is \$0.25 per printed paper page and \$5.00 per electronic document. *Condominium General Regulation s. 9.*