



This certificate does not amend, extend or alter the coverage afforded by the policies below.

1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS

To Whom It May Concern

2. INSURED'S FULL NAME AND MAILING ADDRESS

DV Logistics Inc.
4977, Levy St.
St-Laurent, Quebec
H9R 4A9

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)

Transportation / Load Broker

4. COVERAGES

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated notwithstanding any requirements, terms or conditions of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.

LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

TYPE OF INSURANCE	INSURANCE COMPANY AND POLICY NUMBER	EFFECTIVE DATE YYYY/MM/DD	EXPIRY DATE YYYY/MM/DD	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)		
				COVERAGE	DED.	AMOUNT OF INSURANCE
COMMERCIAL GENERAL LIABILITY ☐ Claims Made OR ☐ Occurrence ☐ Products and/or completed operations ☐ Employer's Liability ☐ Cross Liability ☐ Waiver of Subrogation ☐ Tenants Legal Liability ☐ Pollution Liability Extension ☐ ☐				Commercial General Liability Bodily Injury and Property Damage Liability - - General Aggregate - Each Occurrence Products and Completed Operations Aggregate ☐ Personal Injury Liability ☐ Personal and Advertising Injury Liability Medical Payments Tenants Legal Liability Pollution Liability Extension ☐ ☐		
☒ Non-Owned Automobiles ☐ Hired Automobiles	665443352 TT CLUB /	2026/10/ 2	2027/ 10/ 2	Non-Owned Automobile	5,000	2,000,000
AUTOMOBILE LIABILITY ☐ Described Automobiles ☐ All Owned Automobiles ☐ Leased Automobiles ** ** All Automobiles leased in excess of 30 days where the insured is required to provide Insurance				Bodily Injury and Property Damage Combined Bodily Injury (Per Person) Bodily Injury (Per Accident) Property Damage		
EXCESS LIABILITY ☐ Umbrella Form ☐				Each Occurrence Aggregate ☐		
OTHER LIABILITY (SPECIFY) ☒ Cargo Legal Liability ☒ Errors & Omissions ☐ ☐	TT CLUB / CNA 665443352	2026 /10/ 2	2027/10/ 2	Any One Occurence Any One Occurence ☐ ☐	5,000 5,000 	1,000,000 1,000,000

5. CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 0 days written notice to the certificate holder named above, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS

AMBRI Assurances Inc.
6500 Trans-Canadienne Suite 204
St-Laurent (Québec) H4T 1X4

BROKER CLIENT ID: 40398

7. ADDITIONAL INSURED NAME AND MAILING ADDRESS

(Commercial general Liability - but only with respect to the operations of the Named Insured)

8. CERTIFICATE AUTHORIZATION

Issuer	AMBRI Assurances Inc.			Contact Number(s)			
Authorized Representative	Salvatore Russo, Comm. Lines. D.I.B.			Type	No	Type	No
Signature of Authorized Representative	X 			Type	No (514) 374-6274	Type	No (514) 374-3312
				Date	2026 10 2	Email Address	info@ambri.ca