

# CERTIFICATE OF INSURANCE

<b>PRODUCER:</b> <b>HARGRAFT SCHOFIELD LP</b> 200 University Avenue, 5th Floor Toronto, Ontario M5H 3C6	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.										
<b>INSURED:</b> <b>Trendway Transportation Services Inc. and/or</b> <b>T.T.S. Leasing Inc., 2 Industrial Road</b> <b>Bolton, Ontario</b> <b>L7E 5T3</b>	<b>CERTIFICATE 1</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>COMPANY 1</b></td> <td><b>MARKEL INSURANCE COMPANY OF CANADA</b></td> </tr> <tr> <td><b>COMPANY 2</b></td> <td></td> </tr> <tr> <td><b>COMPANY 3</b></td> <td></td> </tr> <tr> <td><b>COMPANY 4</b></td> <td></td> </tr> <tr> <td><b>COMPANY 5</b></td> <td></td> </tr> </table>	<b>COMPANY 1</b>	<b>MARKEL INSURANCE COMPANY OF CANADA</b>	<b>COMPANY 2</b>		<b>COMPANY 3</b>		<b>COMPANY 4</b>		<b>COMPANY 5</b>	
<b>COMPANY 1</b>	<b>MARKEL INSURANCE COMPANY OF CANADA</b>										
<b>COMPANY 2</b>											
<b>COMPANY 3</b>											
<b>COMPANY 4</b>											
<b>COMPANY 5</b>											

### COMPANIES AFFORDING COVERAGE

## COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICES.

CO #	TYPE OF INSURANCE	POLICY NUMBER	EFFECTIVE DATE (M/D/Y)	EXPIRATION DATE (M/D/Y)	Canadian Funds	
1.	<b>GENERAL LIABILITY</b>  <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY  <input type="checkbox"/> SCHEDULED AUTOS  <input checked="" type="checkbox"/> HIRED AUTOS  <input type="checkbox"/> NON-OWNED AUTOS  <input type="checkbox"/> GARAGE LIABILITY	P717-4642	5/9/2007	5/9/2008	EACH OCCURRENCE	\$10,000,000
					PRODUCTS-COMP/OPS AGGREGATE	C.S.L.
					PERSONAL INJURY	
					MEDICAL EXPENSE (Any one person)	
1.	<b>AUTOMOBILE LIABILITY</b>  <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY	P717-4642	5/9/2007	5/9/2008	COMBINED SINGLE LIMIT	\$10,000,000
					BODILY INJURY (Any one person)	
					BODILY INJURY (Per accident)	
					PROPERTY DAMAGE	
1.	<b>OTHER:</b> <b>CARGO</b>	P717-4642	5/9/2007	5/9/2008	- \$1,000,000. Limit - -	

### DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / RESTRICTIONS / SPECIAL ITEMS

- C.S.L. = COMBINED SINGLE LIMIT. ALL VEHICLES OWNED, REGISTERED, LEASED TO THE NAMED INSURED.  
 - ALL PERILS DEDUCTIBLE \$5,000 (TRACTORS/TRAILERS); \$500 (LIGHT COMMERCIAL & PRIVATE PASSENGER)

CERTIFICATE HOLDER	CANCELLATION
TO WHOM IT MAY CONCERN          ATTENTION: FAX #:	AUTHORIZED REPRESENTATIVE Hargraft Schofield LP  