

DECLARATION OF INSURANCE COVERAGE FOR REGISTERED PROFESSIONALS

(Schedule C of the Building Bylaw No. 4400, 2004)

Building Permit No.: _____

Re: Construction/Alteration: _____

Civic Address: _____

I _____ P.Eng/MAIBC and a member of
the firm _____ declare that I am covered for
professional errors and omissions insurance in accordance with policy # _____ issued
by _____ in the amount of not less than \$1,000,000.

I confirm that those items identified on the *Letters of Assurance* submitted in support of the Building
Permit are covered by the above policy.

Date: _____

Name: _____

Company: _____

Signature: _____

Freedom of Information and Protection of Privacy Act: personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act and the Community Charter and will be used for the purpose of processing your permit application. If you have any questions about the collection, use or disclosure of this information, please call the Legislative Services Department at 604-921-3497.