



Insurance

RBC Insurance Agency Ltd.

Po Box 5010, Station A
Mississauga ON L5A 4L2
Phone 1 800 769 2526
Fax 1 800 276 1947

Eugene Twien
117 Van Fleet Terr
Milton ON L9T 0Y2

January 29, 2021

Important information regarding your automobile insurance

Your policy number: W0953816

Your insurance coverage begins on: February 28, 2021

Dear Eugene Twien,

Thank you for choosing RBC Insurance and insuring your vehicle(s) through us.

We appreciate your business. You have chosen to receive your documents electronically. Your insurance package includes the following documents:

- **Motor Vehicle Liability Insurance Card ("pink card")** - This is your proof of insurance. You will receive a printed copy in the mail which you should keep with you while driving.
- **Certificate of Automobile Insurance** - This is a personalized summary of your insurance coverage. If you would like a more detailed explanation, complete policy wordings are available online at www.rbcinsurance.com/autopolicywordings
- **Payment Summary** - This provides details of your insurance payments which are payable to Aviva General Insurance Company.
- **Policy change forms** - These describe additional coverage you have purchased.
- **Application for Automobile Insurance** - Please review your application and call us if any of the information is inaccurate or has changed.

Notify us if your information has changed

Your coverage and premium are based on the information you have provided. If any information is inaccurate, or if the information changes at any time, you must notify us as it can impact our assessment of your risk. If you don't notify us, it could affect your right to receive benefits in the event of a claim and/or could result in your policy being cancelled or voided. This includes, but is not limited to, information such as:

- The use of your vehicle
- The drivers of your vehicle
- The address where the vehicle is parked most nights.

If you have any questions about your **automobile** insurance, or if you would like to discuss any other insurance needs, please call us at 1 800 769 2526. You can also visit www.rbcinsurance.com to find an RBC Insurance store near you. Our licensed Insurance Advisors can provide the insurance advice you need to protect what's important to you.

Once again, thank you for choosing RBC Insurance.

Your Licensed Insurance Advisor

P.S. Did you know you can enjoy savings on life insurance? Ask us how!

If you need to make a claim, please call 1 800 769 2526

Home and Auto insurance products distributed by RBC Insurance Agency Ltd. and
underwritten by Aviva General Insurance Company.
Life insurance products distributed and underwritten by RBC Life Insurance Company.
®/™ Trademarks of Royal Bank of Canada. Used under license.

Thank you for choosing us

You're protected by insurance coverage that's built around you and your unique needs.

Hassle-free claims service

When the unexpected happens, you can be confident that our claims professionals will respond quickly so you can get back on track as soon as possible.

You can call our experienced Claims Care Advisors **24 hours a day, 7 days a week**.

To make a claim and for all claims-related inquiries
Call 1 800 769 2526

Claims service satisfaction guarantee

This industry-leading promise guarantees that if you're not happy with our claims service (after a covered claim) and we can't resolve it, we'll give you a cheque for the amount of your annual premium at the time of loss. If you have any questions about our Claims Service Satisfaction Guarantee, please contact a licensed RBC insurance advisor to learn more.

Aviva General Insurance Company

10 Aviva Way Suite 100
Markham ON L6G 0G1

Certificate Of Automobile Insurance (Ontario)

POLICY NUMBER:
W0953816

This is your Certificate of Automobile Insurance. Contact your Broker/Agent with any questions or if you require clarification regarding your coverage choices

NAMED INSURED AND PRIMARY ADDRESS

Eugene Twien
117 Van Fleet Terr
Milton ON L9T 0Y2

PRODUCER CODE: B009563

RBC INSURANCE AGENCY LTD.
PO BOX 5010, STATION A
MISSISSAUGA ON L5A 4L2
Telephone # 1 800 769 2526

Policy Effective From: February 28, 2021 12:01 a.m.

To Expiry Date: February 28, 2022 12:01 a.m.

All times are local times at the Named Insured's primary address shown on this Certificate.

Described Automobiles

Automobile	Year	Description	Serial Number	Purchase Price/ List Price New
1	2008	MITSUBISHI LANCER ES 4DR FOUR-DOOR SEDAN	JA3AU26U08U606769	\$10,000

Insurance Coverages	Automobile 1			Automobile		
	Limit	Premium	Premium for Occasional Driver	Limit	Premium	Premium for Occasional Driver
Liability Bodily Injury Property Damage	\$1,000,000 As stated in Section 4 of Policy	\$782 \$39		As stated in Section 4 of Policy		
Accident Benefits (Standard Benefits)		\$892				
Optional Increased Accident Benefits Income Replacement (\$600/\$800/\$1,000)	Up to \$ per week			Up to \$ per week		
Medical, Rehabilitation & Attendant Care (\$130,000/ \$1,000,000)						
Optional Catastrophic Impairment (additional \$1,000,000 added to Standard Benefit or Optional Medical, Rehabilitation & Attendant Care Benefit) Caregiver, Housekeeping & Home Maintenance Death & Funeral Dependent Care Indexation Benefit (Consumer Price Index)	As stated in Section 4 of Policy			As stated in Section 4 of Policy		
Uninsured Automobile	As stated in Section 5 of Policy	\$14		As stated in Section 5 of Policy		
Direct Compensation - Property Damage* *This policy contains a partial payment of recovery clause for property damage if a deductible is specified for direct compensation-property damage. Loss or Damage** **This policy contains a partial payment of loss clause. A deductible applies for each claim except as stated in your policy. Specified Perils (excluding Collision or Upset) Comprehensive (excluding Collision or Upset) Collision or Upset All Perils	Deductible	Premium	Premium for Occasional Driver	Deductible	Premium	Premium for Occasional Driver
		\$395				
	\$500	\$53				
	\$500	\$542				

Insurance Coverages	Automobile 1			Automobile		
Policy Change Forms OPCF 44R - Family Protection 20/27 Bundle: OPCF 20 - Transportation Replacement NPCF 27 - Legal Liability For Damage To Non-Owned Automobile(s)	Limit \$1,000,000 \$1,000 \$50,000	Premium \$12 \$60		Limit	Premium	
	Occasional Driver Subtotals			Occasional Driver Subtotals		
Premium Subtotals		\$2,789				
*Total Premium for each Automobile			\$2,789			
*Premium Subtotal + Occasional driver Subtotals						

Discounts/Surcharges	
Automobile 1	Discounts: Winter Tire Discount; Conviction Free Discount - Principal Operator

Total Policy Premium		\$2,789
(Total premium for Automobile 1)		
Minimum Non-Refundable Premium	\$50	Tax \$0.00
Total Policy Cost		\$2,789.00

Rating Information

Driver Information						Assignment to Automobile				Convictions		
Driver No.	Driver Name	Age	Marital Status	Yrs. Lic	Driver's Training	Principal	Secondary	Occasional	Excluded	Serious	Major	Minor
1	Eugene Twien	24	Single	4	N	1				0	0	0

	Kilometres Driven		Gross Vehicle Weight Rating	Class Description	
Auto No.	Annually	To Work 1-Way	(Commercial Vehicles Only)	Class	Derived from driver and use of automobile information stated in this certificate Description
1	20,000 Km	15 Km		13	Single male driver, age 23 or 24.

Driving Record			Rate Group			Rating Territory			Chargeable Claims			
Auto No.	B.I.	P.D.	A.B.	D.C. Coll/ A.P.	A.B.	DCPD/ Coll/ A.P.	CMP/ SPP	Vehicle Code	Terr Code	Description	Date DD MM YY	B.I. P.D. A.B. Coll/A.P.
1	3	3	3	3	38	29	23	792700	724	Territory 9		

Auto No.	Lessors

Auto No.	Lienholders (to whom loss may be jointly payable)

This Certificate contains important information about your automobile insurance.	
This Certificate is proof of a contract of insurance between the Named Insured and the Insurer, subject in all respects to the Ontario Automobile Policy (OAP 1). In return for the premium charged and the statements contained in the application, the contract provides the coverage outlined in this Certificate. You only have a particular coverage for a specific automobile if this Certificate shows a premium for it, or shows the coverage is provided at no cost. All other terms of the Policy remain the same unless stated otherwise in this Certificate. Your Insurer will provide you with a copy of the Policy if you request it	

This Certificate is only valid if it is signed by an authorized representative of the Insurer.



Authorized Signature of Insurer: Corporate Secretary



Chief Executive Officer

For the purposes of the Insurance Companies Act (Canada), this document was issued in the course of the Insurer's insurance business in Canada.

Warning: The *Insurance Act* provides that where (a) an Applicant for a contract, (i) gives false particulars of the described automobile to be insured to the prejudice of the Insurer, or (ii) knowingly misrepresents or fails to disclose in the application any fact required to be stated therein; or (b) the Insured contravenes a term of the contract or commits a fraud; or (c) the Insured wilfully makes a false statement in respect of a claim under the contract, a claim by the Insured, for other than such statutory accident benefits as are set out in the Statutory Accident Benefits Schedule, is invalid and the right of the Insured to recover indemnity is forfeited.

Warning - Offences

It is an offence under the *Insurance Act* to knowingly make a false or misleading statement or representation to an Insurer in connection with the person's entitlement to a benefit under a contract of insurance, or to wilfully fail to inform the Insurer of a material change in circumstances within 14 days, in connection with such entitlement. The offence is punishable on conviction by a maximum of \$250,000 for the first offence and a maximum fine of \$500,000 for any subsequent conviction.

It is an offence under the federal *Criminal Code* for anyone to knowingly make or use a false document with the intent it be acted on as genuine and the offence is punishable, on conviction, by a maximum of 10 years imprisonment.

It is an offence under the federal *Criminal Code* for anyone, by deceit, falsehood or other dishonest act, to defraud or to attempt to defraud an insurance company. The offence is punishable, on conviction, by a maximum of 14 years imprisonment for cases involving an amount over \$5,000 or otherwise a maximum of 2 years imprisonment.

This is a brief explanation of the insurance outlined in this Certificate. More specific details of your policy wordings are available on The Financial Services Commission of Ontario's website at www.fsc.o.gov.on.ca or on request by contacting your broker.

Liability

Provides coverage for you or other insured persons if someone else is killed or injured or their property is damaged in an automobile incident. It will pay for legitimate claims against you or other insured persons up to the limit of your coverage, and the cost of settling claims.

Accident Benefits -

Your insurance company is obligated to explain details of Accident Benefits coverage to you

Provides benefits that you and other insured persons are entitled to receive if injured or killed in an automobile accident. These benefits may include: income replacement for persons who have lost income; payments to non-earners who suffer complete inability to carry on a normal life; payment of medical, rehabilitation and attendant care expenses; payment of certain other expenses; payment of funeral expenses and payments to survivors of a person who is killed. You may also purchase optional benefits to increase the standard level of benefits provided in the policy. The optional benefits your insurance company must offer are: income replacement; medical, rehabilitation and attendant care; optional catastrophic impairment; caregiver, housekeeping and home maintenance; death and funeral; dependant care; and an indexation benefit.

Uninsured Automobile

Provides coverage if you or other insured persons are injured or killed by an uninsured motorist or by a hit-and-run driver. It covers damage to your automobile and its contents caused by an identified uninsured motorist.

Direct Compensation - Property Damage

Provides coverage in Ontario, under certain conditions, for damage to your automobile and to property it is carrying, when another motorist is responsible. It is called Direct Compensation because you will collect from us, your insurance company, even though you are not at fault for the accident. There may be a deductible amount, and this amount is either paid by you toward the cost of repairs or is deducted from the loss settlement. Higher deductibles may reduce your premium.

Loss or Damage

Provides a selection of optional coverages for your own automobile. Payments cover direct and accidental loss of, or damage to, a described automobile and its equipment. There is usually a deductible amount indicated for each coverage and this amount is either paid by you toward the cost of repairs or is deducted from the loss settlement. Higher deductibles may reduce your premium.

There are four types of coverages:

- **Specified Perils:** Covers the described automobile against loss or damage caused by certain specific perils. They are: fire; theft or attempted theft; lightning; windstorm; hail or rising water; earthquake; explosion; riot or civil disturbance; falling or forced landing of aircraft or parts of aircraft; or the stranding, sinking, burning, derailment or collision of any kind of transport in or upon which the described automobile is being transported.
- **Comprehensive:** Covers a described automobile against loss or damage other than those covered by Collision or Upset, including perils listed under Specified Perils, falling or flying objects, missiles and vandalism.
- **Collision or Upset:** Covers damage when a described automobile is involved in a collision with another object or tips over.
- **All Perils:** Combines the Collision or Upset and Comprehensive coverages.

OPCF 44R Family Protection Endorsement

The insurer shall indemnify an eligible claimant for the amount that he/she is legally entitled to recover from an inadequately insured motorist as compensatory damages in respect of bodily injury to or death of an insured person arising directly or indirectly from the use or operation of an automobile. The Insurer's maximum liability is the amount by which the limit of family protection coverage exceeds the total of all limits of motor vehicle liability insurance, or other guarantees required by law in lieu of insurance, of the inadequately insured motorist and of any person jointly liable with that motorist.

CANCELLATION REQUEST - POLICY NO. W0953816

FOR FURTHER INFORMATION, CONTACT 1 800 769 2526

This section to be completed and signed by the Insured to request cancellation of this policy in its entirety.

In return for the unearned portion of the premium, if any, this policy is cancelled effective at 12:01A.M. Standard Time on _____.
Any interim and renewal certificates, including liability cards, are no longer valid.

If payable to other than Insured,
Lienholder must waive claim.

Signature of Insured / Lessee

Signature of Lienholder

Reason for Cancellation:

- ☐ Premium
- ☐ Vehicle sold
- ☐ Other, please specify

POLICY CHANGE FORMS AND WORDINGS:

These forms describe changes to the standard Ontario automobile policy.

OPCF 20 - COVERAGE FOR TRANSPORTATION REPLACEMENT

1. Purpose of This Change

This change is part of your policy. It provides coverage for you when you need to pay for other means of transportation because of loss or damage to your automobile caused by a peril for which you are insured. It replaces coverage by section 7.4.4 of your policy, "Loss of Use Due to Theft."

2. What We Will Pay

- 2.1. In return for the premium charged, we will reimburse you for the reasonable expenses of renting a similar substitute automobile. This includes the reasonable expenses of taxicabs or public transportation.
- 2.2. The most we will pay on a per occurrence basis is the limit shown in the insurance coverages by vehicle section of or in your policy document.
- 2.3. If the loss of use is because of theft of your entire automobile, this change replaces section 7.4.4 of your policy, "Loss of Use Due To Theft". But, we will not pay less than the limits described in that section.

3. Limitations On Your Coverage

- 3.1. We will only pay if the costs for loss or damage to your automobile exceed any applicable deductible amount shown on your Certificate of Automobile Insurance.
- 3.2. We will reimburse you from:
 - the time the loss or damage occurs if your automobile cannot be operated under its own power; or
 - 12:01 a.m. of the day following your report to us or the police that your automobile has been stolen.In all other cases, we will reimburse you from the time your automobile is delivered for repair due to loss or damage.
- 3.3. Your coverage ends on the date that:
 - your automobile is repaired or replaced; or
 - we offer you a payment to settle the claim

All other terms and conditions of your policy remain the same.

NPCF 27 - LIABILITY FOR DAMAGE TO NON-OWNED AUTOMOBILE (S) AND OTHER COVERAGES WHEN INSURED PERSONS DRIVE, RENT OR LEASE OTHER AUTOMOBILES

1. Purpose of This Change

This change is part of your policy. It extends coverage for loss or damage to a non-owned automobile including its equipment resulting from the care, custody or control of that non-owned automobile, by an insured person and when an insured person drives other automobiles or rents or leases other automobiles.

2. Who is Covered

- 2.1. If the Certificate of Automobile Insurance is in the name of an individual or individuals, an insured person in this change form means you, your spouse and all drivers listed in the policy.
- 2.2. If the Certificate of Automobile Insurance is in the name of a corporation, unincorporated association, partnership, sole proprietorship or other entity, an insured person in this change form means an owner, partner or employee and their spouses for whose regular use a described automobile is supplied.

3. Liability for Damage to Non-Owned Automobiles

3.1. What We Will Cover

We will provide coverage for the liability imposed by law or assumed by any written agreement for loss or damage to a non-owned automobile including its equipment resulting from the care, custody or control of that non-owned automobile by an insured person. This loss or damage must result from a peril described under All Perils of Section 7 – Loss or Damage Coverage, subject to a **\$500.00** deductible on each separate claim. If the loss is caused by a peril specifically insured for a lower deductible amount as indicated on your Certificate of Automobile Insurance, the lower deductible applies on each separate claim.

3.2. Limitations on This Coverage

- 3.2.1. The coverage applies only to an automobile with a Gross Vehicle Weight Rating of 4,500 kilograms or less.
- 3.2.2. We will not cover loss or damage to any automobile which is:
 - owned or licensed in the name of any person insured by this change or by any person living in the same dwelling as these persons, or
 - owned or leased by the employer of these persons.
- 3.2.3. Where applicable, section 3.3.1, 3.3.2 and 3.3.3 of your policy will apply to this change.
- 3.2.4. We will not pay more than the amount stated on your Certificate of Automobile Insurance under this change for any one occurrence plus the costs provided for in 3.2.3 above.
- 3.2.5. The automobile must be used with the owner's or lessee's consent.

4. Providing Other Coverage When Insured Persons Drive, Rent or Lease Other Automobiles

4.1. What We Will Cover

We will provide the Liability, Accident Benefits, Uninsured Automobile and Direct Compensation - Property Damage coverage described in your policy when the insured persons drive other automobiles. However, we will not provide Liability coverage to persons who are excluded

drivers under this policy when they drive, in Ontario, an automobile which is rented or leased for a period of less than 30 days. We will also provide Liability coverage to insured persons who rent or lease automobiles for periods of not more than 30 days, but only with respect to the liability of the insured persons for the negligence of the drivers of the rented or leased automobile, and we will not provide this additional Liability coverage if the driver of the rented or leased automobiles is an excluded driver under this policy.

4.2. Definition of Other Automobile

For the purposes of Section 3, "Liability Coverage," Section 4, "Accident Benefits Coverage," Section 5, "Uninsured Automobile Coverage," and Section 6, "Direct Compensation - Property Damage," of your policy, other automobile also means:

Any automobile with a GVWR of 4,500 kilograms or less, other than the described automobile, while driven by an insured person referred to in 2, when the other automobile;

- i. is not being driven by an insured person in connection with the business of selling, repairing, maintaining, storing, servicing or parking automobiles;
- ii. is not owned or frequently used by an insured person or anyone living in the same dwelling as the insured person;
- iii. is not owned, hired or leased by an insured person's employer or by an employer of anyone living in the same dwelling as the insured person; and
- iv. is not being used to carry paying passengers or to make commercial deliveries at the time of the loss.

Any automobile with a GVWR of more than 4,500 Kilograms, other than the described automobile, while driven by an insured person referred to in 2, when the other automobile is being used for personal purposes and only if it is rented for no more than 7 days.

For Direct Compensation - Property Damage Coverage the other automobile cannot be a described automobile in a motor vehicle liability policy.

4.3. Limitations on This Coverage

This coverage does not apply to anyone who owns an insured automobile or leases an automobile covered by OPCF 5, "Permission to Rent or Lease Automobile(s) and Extending Coverage to the Specified Lessee(s)," or a similar endorsement.

All other terms and conditions of your policy remain the same.

02/2020

Privacy Information

Our Privacy Policy And Commitment To Protecting Your Privacy

Aviva Canada Inc. and our member companies¹ ("Aviva") are committed to protecting and keeping private our policyholders' Personal Information. Our Privacy Policy sets out principles on the collection, retention, use and disclosure of Personal Information. All employees are required to comply with the Privacy Policy in the execution of their daily activities.

At Aviva we identify to our customers the purpose for collecting their Personal Information at or prior to its actual collection. Our customers in turn must consent to its collection implicitly, or expressly in order for us to use it for those purposes. We are committed to ensure that the Personal Information collected on our customers is only used for the purpose for which it was originally intended.

Aviva shall collect, retain, use and disclose your Personal Information in accordance with our Privacy Policy. If we require your Personal Information for any other purpose other than as identified in our Privacy Policy, Aviva will seek your consent prior to using it.

We issue an insurance policy with the understanding that, in addition to providing your consent, you have obtained the consent from all persons named in your insurance policy for the collection, retention, use and disclosure of their Personal Information, for the purposes we have identified.

What We Will NOT Do With Your Information

We **do not** sell customer information to anyone. Nor do we share customer information with organizations outside of our member companies that would use it to contact you about their own products or services.

We Strive To Protect Your Personal Information

All employees, independent brokers, agents, suppliers, and others as permitted by the criteria outlined in our Privacy Policy, who are granted access to customer records, understand the importance of keeping this information protected and confidential. They are clearly advised they are to use the information only for the purposes intended.

We've also established physical and systems safeguards, along with the proper processes, to protect customer information from unauthorized access or use.

The member companies of Aviva Canada Inc. may internally share your Personal Information as permitted by the Privacy Policy. We may also use service providers located outside of Canada or related companies located outside of Canada to collect, use, retain or disclose your Personal Information as permitted by the criteria outlined in our Privacy Policy. In such circumstances, we will attempt to contractually protect your Personal Information, however, it may be subject to the laws of that jurisdiction and may be accessed by the courts, law enforcement and national security services of that jurisdiction.

Your Privacy Choices

You may withdraw your consent at any time (subject to legal or contractual obligations and on providing us reasonable notice) by contacting our Privacy Officer in writing. Please be aware that withdrawing your consent may prevent us from providing you with any requested product or service.

We may amend our Privacy Policy from time to time. For a copy of our Privacy Policy or for more information about our Privacy Policy and procedures, our member companies or to view jurisdictions where your Personal Information may be collected, used, retained or disclosed, please visit our website at www.avivacanada.com, or contact our Privacy Officer at:

Aviva Canada Inc.
10 Aviva Way, Suite 100
Markham, ON L6G 0G1
Telephone: 1 800 387 4518 ext. 4167014171 Fax: 416 755 4075
E-mail: CAPrivacyOfficer@aviva.com

¹Aviva Canada Inc. insurance companies include:

- Aviva General Insurance Company
- Aviva Insurance Company of Canada
- Elite Insurance Company
- Pilot Insurance Company
- S&Y Insurance Company
- Scottish & York Insurance Co. Limited
- Traders General Insurance Company

CODE OF CONSUMER RIGHTS AND RESPONSIBILITIES

The staff of Aviva General Insurance Company (along with the brokers and agents who sell home, auto and business insurance), are committed to protecting your rights. These include the right to be fully informed, to be treated with respect, to timely claims handling and complaint resolution, and to privacy.

Insurance is a two-way contract, and you have a role to play. You are responsible for understanding your needs, asking questions and providing accurate, up-to-date information to your insurer. For more information about your role, speak to your insurance representative and read your policy.

Right To Be Informed

You have the right to an easy-to-understand explanation of how insurance works and how insurers calculate price based on relevant facts. You can expect to access clear information about your policy, your coverage and the claims settlement process. Under normal circumstances, insurers will advise an insurance customer of changes to, or the cancellation of, a policy at least 30 days prior to the expiration of the policy. Your insurer is required to provide you with the renewal terms of your policy at least 30 days prior to the expiration of the policy.

You have the right to know how your broker or agent is compensated, and if they have any conflicts of interest.

Responsibility to understand your needs

You are responsible for asking questions and educating yourself about your policy. Visit www.abc.ca for information about questions you should ask your insurance provider. Make sure you ask all relevant questions and give your insurance provider a detailed explanation of your circumstances to help him or her make informed recommendations on what your policy should include. This will ensure that you have the right insurance coverage.

You are responsible for making premium payments as required by your insurer. Failure to do so could result in a lapse of coverage or cancellation of your policy.

Right to Timely and Transparent Claims Handling

You can expect qualified staff to respond to your claim in a timely manner. You have the right to be informed of procedures and timelines for settling your claim, as well as the status of your claim. If your claim is denied, you have the right to be informed why.

Responsibility to Provide Accurate Information

You are required to provide all relevant information in your application for insurance and you must ensure that the information is accurate. If you have questions about the application or policy, contact your insurance representative and have him or her explain it to you to ensure that you understand your and the insurer's obligations.

Right to complaint resolution

You can access your company's complaint resolution process. Your insurer, broker or agent can provide you with information about how you can ensure that your complaint is heard and promptly handled. You may also contact your provincial insurance regulator or the independent General Insurance OmbudService (www.giocanada.org).

Responsibility to Update Your Information

To maintain your protection against loss, you must promptly inform your insurance company, broker or agent of any change in your circumstances, such as renovations to your home, the purchase of a big-ticket item that may require additional insurance coverage or having a home-based business.

Responsibility to Report the Facts

You must report an accident or claim, providing complete and accurate details, as soon as possible following the accident or incident giving rise to the claim.

Right to privacy

You have the right to understand how your personal information will be used. All insurers have privacy statements and are subject to Canada's privacy laws. Ask your insurer to provide you with a copy of its privacy statement.



Insurance

RBC Insurance Agency Ltd.

Po Box 5010, Station A
Mississauga ON L5A 4L2
Customer Service 1 800 769 2526
Fax 1 800 276 1947

COLLECTION AND USE OF PERSONAL INFORMATION

Collecting your personal information

We RBC Insurance Agency Ltd. may from time to time on our own behalf and/or on behalf of the underwriter collect information about you such as:

- information establishing your identity (for example, name, address, phone number, date of birth, etc.) and your personal background;
- information related to or arising from your relationship with and through us;
- information you provide through the application and claim process for any of the insurance products and services we offer; and
- information for the provision of insurance products and services.

We may collect information from you, either directly or through our representatives. We may collect and confirm this information during the course of our relationship. We may also obtain this information from a variety of sources including (government departments responsible for the licensing of motor vehicles and drivers,) Investigative Services Division of the Insurance Bureau of Canada, CGI Insurance Solutions and Services, (vehicle data recorders), insurance companies, your employer, regulatory bodies and third party suppliers.

"In accordance with Article 177 of the Automobile Insurance Act, the data and information concerning accidents in which you, and the drivers of your vehicle, have been involved will be transmitted by the underwriter to the Fichier central des sinistres automobiles of the Autorité des marchés financiers and, where such is the case, to other automobile insurer. You, and the drivers, have rights of access and correction pursuant to the Act respecting Access to documents held by public bodies and the Protection of personal information."

We are informing you that, in accordance with Article 179.2 of the Automobile Insurance Act, the rate for issuing or renewing this automobile insurance policy, or for adding a driver to an existing policy, has been set by taking into account information obtained from the Fichier central des sinistres automobiles of the Autorité des marchés financiers.

Using your personal information

This information may be used from time to time for the following purposes:

- to verify your identity and investigate your personal background;
- to offer and maintain insurance products and services you may request;
- to evaluate insurance risk;
- to better understand your insurance situation;
- to determine your eligibility for insurance products and services we offer;
- to help us better understand the current and future needs of our clients;
- to communicate to you any benefit, feature and other information about insurance products and services you have with us;
- to help us better manage our business and your relationship with us;
- as required or permitted by law.

For these purposes, we may make this information available to our employees, our agents and service providers and to insurance companies as necessary, who are required to maintain the confidentiality of this information.

In the event our service provider is located outside of Canada, the service provider is bound by, and the information may be disclosed in accordance with, the laws of the jurisdiction in which the service provider is located.

Upon your request, we may give this information to other persons.

We may also use this information and share it with RBC® companies (i) to manage our risks and operations and those of RBC companies, (ii) to comply with valid requests for information about you from regulators, government agencies, public bodies or other entities who have a right to issue such requests, and (iii) to let RBC companies know your choices under "Other uses of your personal information" for the sole purpose of honouring your choices.

Other uses of your personal information

- We may use this information to promote other products and services we offer, and promote products and services of third parties we select, which may be of interest to you. We may communicate with you through various channels, including telephone, computer or mail, using the contact information you have provided.
- We may also, where not prohibited by law, share this information with RBC companies for the purpose of referring you to them or promoting to you products and services which may be of interest to you. We and RBC companies may communicate with you through various channels, including telephone, computer or mail, using the contact information you have provided. You acknowledge that as a result of such sharing they may advise us of those products or services provided.
- If you also deal with RBC companies, we may, where not prohibited by law, consolidate this information with information they have about you to allow us and any of them to manage your relationship with RBC companies and our business.

You understand that we and RBC companies are separate, affiliated corporations. RBC companies include our affiliates which are engaged in the business of providing any one or more of the following services to the public: deposits, loans and other personal financial services; credit, charge and payment card services; trust and custodial services; securities and brokerage services; and insurance services.

You may choose not to have this information shared or used for any of these “Other uses” by contacting us as set out below, and in this event, you will not be refused insurance products or services just for that reason. We will respect your choices and, as mentioned above, we may share your choices with RBC companies for the sole purpose of honouring your choices regarding “Other uses of your personal information”.

Your right to access your personal information

You may obtain access to the information we hold about you at any time and review its content and accuracy, and have it amended as appropriate; however, access may be restricted as permitted or required by law. To request access to such information, to ask questions about our privacy policies or to request that the information not be used for any or all of the purposes outlined in “Other uses of your personal information” you may do so now or at any time in the future by contacting us at 1 800 769 2526.

Our privacy policies

You may obtain more information about our privacy policies by asking for a copy of our “Financial fraud prevention and privacy protection” brochure, by calling us at the toll free number shown above or by visiting our web site at www.rbc.com/privacysecurity.

Compensation Disclosure

Your purchase of this policy may contribute to the advisor's overall sales results for which they will be eligible to receive compensation in the form of salary, commission and bonuses.

Here are your liability cards. Remember that one of these liability cards, as well as the vehicle registration, must be in your vehicle while it is being driven. Your liability cards are important documents.

TEAR HERE		TEAR HERE	
NAME AND ADDRESS OF INSURANCE COMPANY / NOM ET ADRESSE DE LA COMPAGNIE D'ASSURANCE Aviva General Insurance Company 10 Aviva Way Suite 100 Markham ON L6G 0G1		NAME AND ADDRESS OF INSURANCE COMPANY / NOM ET ADRESSE DE LA COMPAGNIE D'ASSURANCE Aviva General Insurance Company 10 Aviva Way Suite 100 Markham ON L6G 0G1	
NAME AND ADDRESS OF INSURED / NOM ET ADRESSE DE L'ASSURE Eugene Twien 117 Van Fleet Terr Milton ON L9T 0Y2		NAME AND ADDRESS OF INSURED / NOM ET ADRESSE DE L'ASSURE Eugene Twien 117 Van Fleet Terr Milton ON L9T 0Y2	
Policy Number / Police Numéro: W0953816 Insured Vehicle - Year - Make - Serial Number Assure - Année - Marque - Série 2008 MITSUBISHI LANCER ES 4DR JA3AU26U08U606769 Effective Date / Date d'entree en vigueur: February 28, 2021 Expiration Date / Date d'expiration: February 28, 2022		Policy Number / Police Numéro: W0953816 Insured Vehicle - Year - Make - Serial Number Assure - Année - Marque - Série 2008 MITSUBISHI LANCER ES 4DR JA3AU26U08U606769 Effective Date / Date d'entree en vigueur: February 28, 2021 Expiration Date / Date d'expiration: February 28, 2022	
Broker/Agent / Courtier(ère) ou agent(e) : RBC Insurance Agency Ltd. Phone / Téléphone : 1 800 769 2526 Claims Assist (toll free) / Assistance sinistres (sans frais) : 1 800 769 2526		Agent/Broker / Courtier(ère) ou agent(e) : RBC Insurance Agency Ltd. Phone / Téléphone : 1 800 769 2526 Claims Assist (toll free) / Assistance sinistres (sans frais) : 1 800 769 2526	
MOTOR VEHICLE LIABILITY INSURANCE CARD CANADA INTER-PROVINCE APPLICABLE WITHIN CANADA AND THE UNITED STATES OF AMERICA		MOTOR VEHICLE LIABILITY INSURANCE CARD CANADA INTER-PROVINCE APPLICABLE WITHIN CANADA AND THE UNITED STATES OF AMERICA	
This certificate is subject to the terms and conditions of the insurer's standard automobile policy. This certifies that the party named herein is insured against liability for bodily injury and property damage by reason of the operation of the motor vehicle described herein, in an amount not less than the statutory minimum requirements in any area of Canada. WARNING: Any person who issues or produces a card to show that there is in force a policy of insurance as indicated herein, that is in fact not in force, is liable to a heavy fine and/or imprisonment and his licence may be suspended. This card should be carried in the insured vehicle for production as proof of insurance when demanded by police. CERTIFICAT D'ASSURANCE AUTOMOBILE RESPONSABILITÉ CANADA INTER-PROVINCE EN VIGUEUR AU CANADA ET AUX ÉTATS-UNIS D'AMÉRIQUE		This certificate is subject to the terms and conditions of the insurer's standard automobile policy. This certifies that the party named herein is insured against liability for bodily injury and property damage by reason of the operation of the motor vehicle described herein, in an amount not less than the statutory minimum requirements in any area of Canada. WARNING: Any person who issues or produces a card to show that there is in force a policy of insurance as indicated herein, that is in fact not in force, is liable to a heavy fine and/or imprisonment and his licence may be suspended. This card should be carried in the insured vehicle for production as proof of insurance when demanded by police. CERTIFICAT D'ASSURANCE AUTOMOBILE RESPONSABILITÉ CANADA INTER-PROVINCE EN VIGUEUR AU CANADA ET AUX ÉTATS-UNIS D'AMÉRIQUE	
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NAME AND ADDRESS OF INSURANCE COMPANY / NOM ET ADRESSE DE LA COMPAGNIE D'ASSURANCE Aviva General Insurance Company 10 Aviva Way Suite 100 Markham ON L6G 0G1		NAME AND ADDRESS OF INSURANCE COMPANY / NOM ET ADRESSE DE LA COMPAGNIE D'ASSURANCE Aviva General Insurance Company 10 Aviva Way Suite 100 Markham ON L6G 0G1	
NAME AND ADDRESS OF INSURED / NOM ET ADRESSE DE L'ASSURE Eugene Twien 117 Van Fleet Terr Milton ON L9T 0Y2		NAME AND ADDRESS OF INSURED / NOM ET ADRESSE DE L'ASSURE Eugene Twien 117 Van Fleet Terr Milton ON L9T 0Y2	
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Ontario Application for Automobile Insurance

Owner's Form (OAF 1)

This is your Application for Automobile Insurance.

- Check it carefully and notify your Broker/Agent of any errors or of any changes in the future.
- Retain this document for your Records.

Some of the items used in this application are explained further below.

Insurance Company

Aviva General Insurance Company
10 Aviva Way
Suite 100
Markham ON L6G 0G1

Broker/Agent

RBC Insurance Agency Ltd.
Po Box 5010, Station A
Mississauga ON L5A 4L2

Insurance Coverages Applied For

Ontario motorists must have the following standard coverages: Liability, Accident Benefits, Uninsured Automobile and Direct Compensation - Property Damage. You may also purchase additional insurance for Loss or Damage to the automobile and Optional Increased Accident Benefits. This is a brief explanation of the insurance coverages available to you. For complete details consult your policy. Your Insurer will supply you with a copy of the policy if you request it.

Liability - Provides coverage for you or other insured persons if someone else is killed or injured or their property is damaged in an automobile accident. It will pay for legitimate claims against you or other insured persons up to the limit of your coverage, and the cost of settling claims.

Accident Benefits - Your insurance company is obligated to explain details of Accident Benefits coverage to you. Provides benefits that you and other insured persons may be entitled to receive if injured or killed in an automobile accident. These benefits include: income replacement for persons who have lost income; payments to non-earners who suffer complete inability to carry on a normal life; payment of care expenses to persons who cannot continue to act as a primary caregiver for a member of their household; payment of medical, rehabilitation and attendant care expenses; payment of certain other expenses; payment of funeral expenses; and payments to survivors of a person who is killed. You may also purchase optional benefits to increase the standard levels of benefits provided in your policy.

The optional benefits your insurance company must offer are:

Increased Income Replacement - the standard level of income replacement provided in the policy (\$400 per week maximum) may be increased by purchasing optional coverage so that the weekly limit is up to \$600, \$800 or \$1,000. All income replacement benefits are based on 70% of your gross weekly income.

Caregiver Benefit, Housekeeping and Home Maintenance Expenses - The standard benefit for caregiver benefit, housekeeping and home maintenance expenses is available only for a person who is catastrophically impaired. You may purchase an optional benefit to provide these coverages for other impairments.

Increased Medical, Rehabilitation and Attendant Care - The standard benefit pays up to \$65,000 for medical, rehabilitation and attendant care expenses with a 5 year time limit in most cases. If catastrophically impaired, the standard benefit pays up to \$1,000,000 for medical, rehabilitation and attendant care expenses. You may purchase an optional medical, rehabilitation and attendant care benefit of \$130,000 or \$1,000,000.

Additional Catastrophic Impairment - You may purchase an optional catastrophic impairment benefit of an additional \$1,000,000 added to the standard medical, rehabilitation and attendant care benefit or the optional increased medical, rehabilitation and attendant care benefit.

Dependant Care - There is no standard dependant care benefit for persons who are employed and care for dependants. You may purchase an optional benefit to receive weekly dependant care expenses of \$75 for the first dependant, and \$25 for each additional dependant, up to \$150 per week.

Indexation Benefit - this optional coverage will ensure that certain weekly benefit payments and monetary limits will be adjusted on an annual basis to reflect changes in the cost of living.

Uninsured Automobile

Provides coverage if you or other insured persons are injured or killed by an uninsured motorist or by a hit-and-run driver. It covers damage to your automobile and its contents caused by an identified, uninsured motorist, subject to a \$300 deductible.

Direct Compensation - Property Damage

Provides coverage in Ontario, under certain conditions, for damage to your automobile and to property it is carrying, when another motorist is responsible. It is called Direct Compensation because you will collect from us, your insurance company, even though you are not at fault for the accident. There may be a deductible amount, and this amount is either paid by you toward the cost of repairs or is deducted from the loss settlement. Higher deductibles may reduce your premium.

Loss or Damage

Provides a selection of optional coverages for your own automobile. Payments cover direct and accidental loss of, or damage to, a described automobile and its equipment. There is usually a deductible amount indicated for each coverage and this amount is either paid by you toward the cost of repairs or is deducted from the loss settlement. Higher deductibles may reduce your premium. There are four types of coverages:

Specified Perils: Covers the described automobile against loss or damage caused by certain specific perils. They are: fire; theft or attempted theft; lightning, windstorm, hail or rising water; earthquake; explosion; riot or civil disturbance; falling or forced landing of aircraft or parts of aircraft; or the stranding, sinking, burning, derailment or collision of any kind of transport in, or upon which, the described automobile is being transported.

Comprehensive: Covers a described automobile against loss or damage other than those covered by Collision or Upset, including perils listed under Specified Perils, falling or flying objects, missiles and vandalism.

Collision or Upset: Covers damage when a described automobile is involved in a collision with another object or tips over.

All Perils: Combines the Collision or Upset and Comprehensive coverages.

For purposes of the Insurance Companies Act (Canada), this document was issued in the course of the insurance company's insurance business in Canada.

Ontario Application for Automobile Insurance Owner's Form (OAF 1)

Policy No. Assigned: W0953816

New Policy ☒	Replacing Policy No. 	Company Bill ☒	Broker/Agency Bill ☐	Other (Specify) 	Language Preferred English ☒ French ☐
Insurance Company (Insurer) Aviva General Insurance Company 10 Aviva Way Suite 100 Markham ON L6G 0G1			Broker/Agent RBC Insurance Agency Ltd. Po Box 5010, Station A Mississauga ON L5A 4L2 Broker Code: B009563		

1	Applicant's Name & Primary Address "Primary Address" means address where applicant normally resides.	Lessor (if applicable)
Name and Address Eugene Twien 117 Van Fleet Terr Milton ON Postal Code L9T 0Y2 Phone No. Home: 6473036392 Work:		Name and Address

2	Policy Period (all times are local times at the applicant's address shown above)
Effective Date: Time: 12:01 a.m. ☒ p.m. ☐ 2021 02 28 Year Month Day	Expiry Date: Time: 12:01 a.m. ☒ 2022 02 28 Year Month Day

3	Described Automobile - Each automobile will be used primarily in the vicinity of the applicant's address, unless otherwise stated in Remarks.							
Auto No.	Model Year	Make or Trade Name		Model		Body Type	No. of Cylinders or Engine Size	Gross Vehicle Weight Rating [] Lbs [] Kg
1	2008	MITSUBISHI		LANCER ES 4DR		FOUR-DOOR SEDAN		
Auto No.	Vehicle Identification No. (Serial No.)		Owned?	Leased?	Purchased/Leased Year Month New? Used?	Purchase Price (including options & taxes)	Automobile Use (*Give details in Remarks section) Pleasure Commute One-way Business Use%*(see Note 1) Farm Commercial*	
1	JA3AU26U08U606769		X		2019 03 X	\$10,000	15 Km	
Auto No.	Estimated Annual Driving Distance	Is any automobile used for car pooling? If Yes, give no. of Passengers and Details		Type of Fuel Used Gas Diesel If other, give details:		Unrepaired Damage?	Modified/Customized? (See Note 2) (If Yes, give details in Remarks section)	
1	20,000 Km	Yes ☐ No ☒		X		Yes ☐ No ☒	Yes ☐ No ☒	

Is the applicant both the Registered Owner and the Actual Owner of the described automobile(s)? Yes ☒ No ☐	
If No, give details in Remarks section.	
Will any of the described automobiles be rented or leased to others, or used to carry passengers for compensation or hire, or haul a trailer, or carry explosives or radioactive material? Yes ☐ No ☒	
Total number of automobiles in the household or business.	1

4	Driver information - List all drivers of the described automobile(s) in the household or business.						
Driver No.	Name as shown on Driver's License	Driver's License Number	Date of Birth Year Month Day			Sex	Marital Status
1	Eugene Twien	T9595-24369-61203	1996	12	03	M	Single

Driver No.	Driver Training Certificate Attached?	Date First Licensed in Canada or U.S. (Class G or equivalent)			Other class of license, if any			Percentage Use by Each Driver			Are any other persons in the household or business licensed to drive?	Do any drivers qualify for Retiree Discount? (See Note 3)
		Class	Year	Month	Class	Year	Month	Auto	Auto	Auto		
1	Yes ☐ No ☒	G	2018	09	G2 G1	2016 2014	03 03				Yes ☐ No ☒	Yes ☐ No ☒

Special Notes

Note 1: Business Use % - State the usual percentage of annual driving distance that is for business use. (Enter 0 if there is no business use)

Note 2: Modified/customized includes changes, other than repairs or restorations that affect the original manufacturer's design specifications or increase the value of the automobile. These may include, but are not limited to: engine modifications; paint changes; non-factory installed wheels, tires and electronic accessories and equipment, etc. If you are insured for "Loss or Damage Coverage", there is a \$1500 limit on non-factory installed electronic accessories and equipment.

Note 3: Retiree Discount - You may be entitled to a discount if you are the principal operator of a described automobile, are retired, have not been employed for 26 weeks or more in the last 52 weeks, do not earn or receive income from any office or employment, are not engaged in any professional occupation and are not operating a business. To qualify, you must be at least age 65, or receiving a pension under the Canada Pension Plan, the Quebec Pension Plan, or a pension registered under the Income Tax Act. If you qualify, your broker or agent will ask you to sign a declaration to confirm this.

If a driver is licensed less than 6 years in Canada, driving experience in other countries may be recognized. Attach proof of other licensing and insurance.

What are the details of the applicant's most recent automobile insurance?

Insurance Company:

Policy No. D4307934

Expiry Date:

CERTAS DIR. INS. CO.(FOR.CIBC)

2022
Year

02
Month

28
Day

To the applicant's knowledge...

Has any driver's licence, vehicle permit etc, issued to the applicant or to any person in the household or business been suspended or cancelled in the last 6 years?

Yes ☐ No ☒

If Yes, give details in Remarks section.

Has any insurance company cancelled automobile insurance for the applicant or any listed driver in the last 3 years?

Yes ☐ No ☒

If Yes, give details in Remarks section.

During the last 3 years, has any automobile insurance policy issued to the applicant or any listed driver been cancelled or has any claim been denied for material misrepresentation?

Yes ☐ No ☒

If Yes, give details in Remarks section.

Has the applicant or any listed driver been found by a court to have committed a fraud connected with automobile insurance?

Yes ☐ No ☒

If Yes, give details in Remarks section.

5 Previous Accidents and Insurance Claims

Give details of all accidents or claims arising from the ownership, use or operation of any automobile by the applicant or any listed driver during the last 6 years. The coverages are: BI - Bodily Injury, PD - Property Damage, AB - Accident Benefits, DCPD - Direct Compensation - Property Damage, UA - Uninsured Automobile, Coll-Collision, AP - All Perils, Comp - Comprehensive, SP - Specified Perils

Driver No.	Auto No.	Date			Coverage Claim Paid Under							Amount Paid or Estimate	Details (Use Remarks section if necessary)
		Year	Month	Day	BI	PD	AB	DCPD	UA	Coll/AP	Comp/SP		

6 History of Convictions - Give details of all convictions of the applicant and any listed driver arising from the operation of any automobile in the last 3 years.

Driver No.	Date Convicted			Details (Use Remarks section if necessary)	Driver No.	Date Convicted			Details (Use Remarks section if necessary)
	Year	Month	Day			Year	Month	Day	

7 Rating Information - AGENT/BROKER AND COMPANY USE ONLY

Auto No.	Class	Driving Record					Driver No		At Fault Claim and Conviction Surcharges	
		BI	PD	AB	DCPD	Coll/AP	Princ	Sec.	Description	%
1	13	3	3	3	3	3	1			
Auto No.	List Price New	Vehicle Code	Rate Group				Location	Territory	Discounts Description and Percentage	
			AB	DCPD	Coll/AP	Comp/Sp				
1	\$10,000	792700	38	29	29	23	724	9		

9	Remarks - Use this space if you have further details.				
Extra sheets attached. ☐					
10	Method of Payment				
Type of Payment Plan		Estimated Policy Premium**	Provincial Sales Tax	Interest	Total Estimated Cost
Amount Paid with Application		Amount Still Due	No. of Remaining Installments	Amount of Each Installment	Installment Due Date
** This policy premium is estimated and subject to adjustment or confirmation by the Insurer. If we issue a policy and the applicant cancels it, there may be a minimum premium shown on your Certificate of Automobile Insurance that will not be refunded.					

11	Declaration of Applicant - Read this section carefully before you sign.			
I understand that to qualify for a driver's license, drivers: • must not suffer from any mental, emotional, nervous or physical disability that significantly interferes with the driver's ability to safely drive an automobile of the class they are licensed for; • must not be addicted to alcohol or a drug to the extent that it significantly interferes with the driver's ability to safely drive an automobile; and • must notify the Ministry of Transportation immediately if the driver become physically or mentally disabled to the extent that it might interfere with the driver's ability to safely drive an automobile.		It is an offence under the federal <i>Criminal Code</i> for anyone to knowingly make or use a false document with the intent it be acted on as genuine and the offence is punishable, on conviction, by a maximum of 10 years imprisonment. It is an offence under the federal <i>Criminal Code</i> for anyone, by deceit, falsehood or other dishonest act, to defraud or to attempt to defraud an insurance company. The offence is punishable, on conviction, by a maximum of 14 years imprisonment for fraud involving an amount over \$5,000 or otherwise a maximum of 2 years imprisonment.		
To the best of my knowledge, • all listed drivers are qualified to hold a driver's license, and • the details in Sections 1 to 6 and 9 are correct.		Notice and Consent I am applying for automobile insurance based on the information provided above. With respect to this application or any renewal or change in coverage, I authorize you to collect, use and disclose my driving record, automobile insurance policy history and automobile insurance claims history as permitted by law for the limited purposes necessary to assess the risk, to investigate and settle claims, and to prevent, detect and suppress fraud. If I am issued an automobile insurance policy or if I make a claim, this information may be pooled with information from other sources and may be subject to analysis for the limited purpose of preventing, detecting or suppressing fraud. For this purpose, the information also may be disclosed to i) fraud prevention organizations, other insurance companies and the police and ii) databases or registers used by the insurance industry to analyze and check information provided against existing information. I declare that I have obtained consent from the listed drivers to the collection, use and disclosure by you of their driving record, automobile insurance policy history and automobile insurance claims history as described above, I also declare that, prior to permitting any other individuals to drive my automobile, I will obtain consent from such individuals to the collection, use and disclosure by you of their driving record, automobile insurance policy history and automobile insurance claims history also as described above. I understand that if I have any questions about this consent I am free to consult with my insurance company representative or legal advisor before signing this document. To obtain further information about how your consent relates to pooling and data analytics to prevent and detect fraud please visit http://www.ibc.ca/en/privacy-terminology.asp.		
Inspection My Insurer may require my automobile to be inspected. If I do not co-operate with any reasonable arrangements to inspect my automobile, I understand my optional loss or damage coverages under Section 7 may be cancelled, and any claims under that section may be denied. Warning - The Insurance Act provides that where: (a) an Applicant for a contract, (i) gives false particulars of the described automobile to be insured to the prejudice of the Insurer, or (ii) knowingly misrepresents or fails to disclose in the application any fact required to be stated therein; or (b) the Insured contravenes a term of the contract or commits a fraud; or (c) the Insured wilfully makes a false statement in respect of a claim under the contract, a claim by the Insured, for other than such statutory accident benefits as are set out in the Statutory Accident Benefits Schedule, is invalid and the right of the Insured to recover indemnity is forfeited. Warning - Offences It is an offence under the Insurance Act to knowingly make a false or misleading statement or representation to an Insurer in connection with the person's entitlement to a benefit under contract of insurance, or to wilfully fail to inform the Insurer of a material change in circumstances within 14 days, in connection with such entitlement. The offence is punishable on conviction by a maximum fine of \$250,000 for the first offence and a maximum fine of \$500,000 for any subsequent conviction.		Applicant's Signature: Date(Y/M/D):		
12	Report of Broker/Agent			
Have you bound this risk? Yes ☐ No ☐		Is this business new to you? Yes ☐ No ☐		Type of Motor Vehicle Liability Insurance Card issued: Temp ☐ Perm ☐ None ☐
		How long have you known the Applicant?		How long have you known the Principal Driver?
Has an inspection been completed? Yes ☐ No ☐				
Broker/Agent Signatures:			Date:	
<i>The Applicant must receive a copy of the signed application.</i> <i>A supplementary form for commercial or public use automobiles may be necessary.</i>				

Please fold and return in envelope provided.

Producer Name and Address:

RBC Insurance Agency Ltd.
 Po Box 5010, Station A
 Mississauga ON
 L5A 4L2

Aviva General Insurance Company

10 Aviva Way Suite 100
Markham ON L6G 0G1

Agent: RBC INSURANCE AGENCY LTD.

Po Box 5010, Station A
Mississauga ON L5A 4L2
Phone 1 800 769 2526
Fax 1 800 276 1947

Auto Temporary Insurance Card Certificat temporaire d'assurance automobile

NAME AND ADDRESS OF INSURANCE COMPANY/ NOM ET ADRESSE DE LA
COMPAGNIE D'ASSURANCE

Aviva General Insurance Company
Head Office, Markham
Ontario, Canada

NAME AND ADDRESS OF INSURED / NOM ET ADRESSE DE
L'ASSURE

Eugene Twien
117 Van Fleet Terr
Milton ON L9T 0Y2

INSURED VEHICLE — YEAR, MAKE, SERIAL NO.

VEHICULE ASSURE — ANNEE, MARQUE, SERIES

2008 MITSUBISHI LANCER ES 4DR JA3AU26U08U606769

FROM 12.01 A.M. TIME / DE 0 h 01 TEMPS	EFFECTIVE DATE / DATE D'ENTRÉE EN VIGUEUR			FOR/POUR 30 DAYS/JOURS
	28 D/J	02 MM	2021 Y/A	

AGENT OR
BROKER

RBC Insurance Agency Ltd.

AGENT OU
COURTIER

MOTOR VEHICLE LIABILITY INSURANCE CARD/CERTIFICAT D'ASSURANCE
AUTOMOBILE RESPONSABILITE

CANADA INTER-PROVINCE

APPLICABLE WITHIN CANADA AND THE UNITED STATES OF AMERICA /EN
VIGUEUR Au CANADA ET AUX ETATS-UNTS D'AMÉRIQUE

This certificate is subject to the terms and conditions of the insurers standard automobile policy.

This certifies that the party named herein is insured against liability for bodily injury and property damage by reason of the operation of the motor vehicle described herein, in an amount not less than the statutory minimum requirements in any area of Canada.

WARNING — Any person who issues or produces a card to show that there is in force a policy of insurance as indicated herein that is in fact not in force is liable to a heavy fine and/or imprisonment and his licence may be suspended.

This card should be carried in the insured vehicle for production as proof of insurance when demanded by police.

Le présent certificat est assujéti aux dispositions et conditions de la police d'assurance automobile de l'Assureur.

Ca certificat atteste que la personne susnommée est assurée contre la responsabilité pour blessures et dommages aux biens découlant de 'usage du véhicule ce-décrit, conformément aux imites minimales exigées par les lois d'assurance en vigueur partout au Canada.

AVERTISSEMENT — Quiconque émet ou présente un tel certificat comme preuve d'une police d'assurance — responsabilité qui effectivement n'est pas en vigueur, est coupable d'une infraction passible d'une forte amende et/ou d'emprisonnement et suspension de son permis.

Ce certificate doit être laissé dans le véhicule assuré afin d'être présenté comme preuve d'assurance lorsque la police l'exige.

NAME AND ADDRESS OF INSURANCE COMPANY/ NOM ET
ADRESSE DE LA COMPAGNIE D'ASSURANCE

Aviva General Insurance Company
Head Office, Markham
Ontario, Canada

NAME AND ADDRESS OF INSURED / NOM ET ADRESSE DE
L'ASSURE

Eugene Twien
117 Van Fleet Terr
Milton ON L9T 0Y2

INSURED VEHICLE — YEAR, MAKE, SERIAL NO.
VEHICULE ASSURE — ANNEE, MARQUE, SERIES

2008 MITSUBISHI LANCER ES 4DR JA3AU26U08U606769

EFFECTIVE DATE / DATE
D'ENTRÉE EN VIGUEUR
February 28, 2021

DATE OF EXPIRY / DATE
D'EXPIRATION
March 30, 2021

Policy No: **W0953816**

AGENT
RBC Insurance Agency Ltd.

MOTOR VEHICLE LIABILITY INSURANCE CARD/CERTIFICAT
D'ASSURANCE AUTOMOBILE RESPONSABILITE

CANADA INTER-PROVINCE

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