

**City of Port Coquitlam Building and Plumbing Bylaw, 2009 No. 3710
Form B**

Registered Professional's Proof of Insurance

City of Port Coquitlam
2580 Shaughnessy Street
Port Coquitlam BC V3C 2A8
Attention: Chief Building Inspector

Date

Re: _____

[civic address of project]

[name of project]

This is to confirm that the undersigned registered professional is insured by a policy of insurance covering liability to third parties for errors and omissions in the provision of professional services in respect of the captioned project, a **certificate of which insurance is attached.**

The undersigned will notify both the Chief Building Inspector and the owner who has engaged the undersigned to provide professional services in respect of the captioned project, in writing, of any termination of or change in the terms of the coverage provided by the policy, immediately upon being informed of or becoming aware of such termination or change.

Signature of Registered Professional

[affix seal]

Name of Registered Professional (Please Print)

Name of Firm

Address

City

Postal Code

Telephone

Email