



CITY OF PORT MOODY,  
100 Newport Drive. P.O. Box 36,  
Port Moody, B.C., V3H 3E1, Canada  
Tel. (604) 469-4534 Fax (604) 469-4533  
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**Schedule "B"**

**PROOF OF LIABILITY INSURANCE**

This form must be submitted by each registered professional submitting Letters of Assurance, prior to issuance of a building permit.

Attention: Building Official

RE: \_\_\_\_\_  
Address of Project (Print)

\_\_\_\_\_  
Legal Description of Project (Print)

The undersigned hereby gives assurance that:

1. I have fulfilled my obligation for insurance coverage as outlined in the City of Port Moody Building Bylaw No. 2577.
2. I have enclosed a copy of my certificate of insurance coverage indicating particulars of such coverage.
3. I am a registered professional as defined in the City of Port Moody Building Bylaw No. 2577.
4. I will notify the building official in writing immediately if the undersigned's insurance coverage is reduced or terminated at any time during construction.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (of Registered Professional)

\_\_\_\_\_  
Address (Print)

\_\_\_\_\_  
(Affix Professional Seal Here)

(If the registered professional is a member of a firm, complete the following)

I am a member of the firm of \_\_\_\_\_ and I sign and seal this letter of behalf of the firm. (print name of firm)