

CERTIFICATE OF LIABILITY INSURANCE

ISSUE DATE YYYY/MM/DD
2022/11/24

BROKER



HUB International HKMB Limited
595 Bay Street, Ste 900
Toronto, ON M5G 2E3
PHONE: 416-597-0008 FAX: 416-597-2313

This certificate is issued as a matter of information only and confers no rights upon the certificate holder and imposes no liability on the insurer. This certificate does not amend, extend or alter the coverage afforded by the policies below.

| | |
|-----------|-----------------------------------|
| Company A | Chubb Insurance Company of Canada |
| Company B | |
| Company C | |
| Company D | |
| Company E | |

INSURED'S FULL NAME AND MAILING ADDRESS

Open Text Corporation and Subsidiaries
275 Frank Tompa Drive
Waterloo, ON N2L 0A1
Canada

COVERAGES

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated notwithstanding any requirements, terms or conditions of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described herein is subject to all terms, exclusions and conditions of such policies.

LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

| TYPE OF INSURANCE | CO LTR | POLICY NUMBER | EFFECTIVE DATE YYYY/MM/DD | EXPIRY DATE YYYY/MM/DD | LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise) | |
|--|--------|-------------------------------|------------------------------|---------------------------|--|--------------|
| COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND/OR COMPLETED OPERATIONS <input checked="" type="checkbox"/> PERSONAL INJURY <input checked="" type="checkbox"/> EMPLOYER'S LIABILITY <input checked="" type="checkbox"/> TENANT'S LEGAL LIABILITY <input checked="" type="checkbox"/> NON-OWNED AUTOMOBILE <input checked="" type="checkbox"/> HIRED AUTOMOBILE | A | 35373119 All Limits in USD | 2022/11/30 | 2023/11/30 | EACH OCCURRENCE | \$ 1,000,000 |
| | | | | | GENERAL AGGREGATE | \$ 2,000,000 |
| | | | | | PRODUCTS - COMP/OP AGGREGATE | \$ 1,000,000 |
| | | | | | PERSONAL INJURY | \$ 1,000,000 |
| | | | | | EMPLOYER'S LIABILITY | \$ 1,000,000 |
| | | | | | TENANT'S LEGAL LIABILITY | \$ 1,000,000 |
| | | | | | NON-OWNED AUTOMOBILE | \$ 1,000,000 |
| | | | | | HIRED AUTOMOBILE | \$ 50,000 |
| AUTOMOBILE LIABILITY <input type="checkbox"/> DESCRIBED AUTOMOBILES <input type="checkbox"/> ALL OWNED AUTOMOBILES <input type="checkbox"/> LEASED AUTOMOBILES ** <input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> | | | | | BODILY INJURY PROPERTY DAMAGE COMBINED | \$ |
| | | | | | BODILY INJURY (Per person) | \$ |
| | | | | | BODILY INJURY (Per accident) | \$ |
| | | | | | PROPERTY DAMAGE | \$ |
| EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM | | | | | EACH OCCURRENCE | \$ |
| | | | | | AGGREGATE | \$ |
| OTHER (SPECIFY) Professional Liability (E&O Including Cyber) Claims Made | A | 35373119 All Limits in USD | 2022/11/30 | 2023/11/30 | Aggregate | \$ 5,000,000 |
| | | | | | Each Claim | \$ |
| | | | | | | \$ |
| | | | | | | \$ |
| | | | | | | \$ |

DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)

Snohomish County is added as Additional Insured(s) to the Commercial General Liability Policy but only with respect to vicarious liability arising out of the operations of the Named Insured.

CERTIFICATE HOLDER

Snohomish County
3000 Rockefeller Ave
Everett, WA 98201

CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

AUTHORIZED REPRESENTATIVE



Per: _____