

# FORTIS

## ENVIRONMENTAL

July 4, 2024

Halton Region  
1151 Bronte Road  
Oakville / ON  
L6M 3L1

The Corporation of the Town of Oakville  
1225 Trafalgar Road  
Oakville / ON  
L6H 0H3

### **Attention: To Whom it May Concern**

**Re: Reliance letter for the Following Report:  
Phase One Environmental Site Assessment  
109, 113, 117, 121, 127, 131 Garden Drive  
Oakville, Ontario**

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Fortis Environmental Inc. (the "Consultant") has prepared the following report(s) on behalf of Plazacorp (the "Client")

- ⊙ Phase One Environmental Site Assessment 109, 113, 117, 121, 131 Garden Drive in Oakville / ON. Dated: May 10, 2024.

We confirm the Reports including the representations, assumptions, findings, opinions and recommendations contained in the Reports, can be relied on by The Corporation of the Town of Oakville (the "Town"), The Regional Municipality of Halton (the "Region") and their peer reviewers as if the Reports were prepared for the use and benefit of the Town and the Region notwithstanding any statement to the contrary contained in the Reports and excluding any limitation on liability agreed to by the Client. The Consultant further agrees that in the case of any inconsistency between this Reliance Letter and any limitations within the Reports provided to the Town, the provisions in this Reliance Letter shall prevail.

We acknowledge and agree that the Town and the Region will utilize the Reports for the purposes of assessing the environmental risk of the Property. We confirm that the Reports were prepared and completed by or under the supervision of a Qualified Person as defined under Ontario Regulation 153/04 (as amended), and in accordance with environmental laws and regulations applicable at the time of the investigation.

The Consultant has and will maintain Professional Liability insurance coverage of no less than \$4,000,000 and attached to this letter is proof of the insurance.

Yours very truly,

**Fortis Environmental Inc.**



**Andrew Topp, P. Geo, QP<sup>(ESA)</sup>**  
Masters of Environmental Science  
Bachelor of Science – Biology, Geology  
Date: January 22, 2024



# CERTIFICATE OF LIABILITY INSURANCE

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.

1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS	2. INSURED'S FULL NAME AND MAILING ADDRESS
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<b>To Whom It May Concern</b>	<b>Fortis Environmental Inc.</b>
	<b>942 Yonge Street, Unit 324</b>
	<b>Toronto, ON</b>
	POSTAL CODE <b>M4W 3S8</b>

3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES (but only with respect to the operations of the Named Insured)
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**Environmental Engineer- Consultant**

4. COVERAGES
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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	INSURANCE COMPANY AND POLICY NUMBER	EFFECTIVE DATE YYYY/MM/DD	EXPIRY DATE YYYY/MM/DD	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)		
				COVERAGE	DED.	AMOUNT OF INSURANCE
<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS MADE <b>OR</b> <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input type="checkbox"/> EMPLOYER'S LIABILITY <input type="checkbox"/> CROSS LIABILITY  <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION  <input type="checkbox"/> NON-OWNED AUTOMOBILES <input type="checkbox"/> HIRED AUTOMOBILES	<b>Beazley Canada Limited</b> <b>19654520</b>	<b>2024/3/16</b>	<b>2025/3/16</b>	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE - EACH OCCURRENCE  PRODUCTS AND COMPLETED OPERATIONS AGGREGATE  <input checked="" type="checkbox"/> PERSONAL INJURY LIABILITY OR <input type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY  MEDICAL PAYMENTS  TENANTS LEGAL LIABILITY  POLLUTION LIABILITY EXTENSION	<b>1,000</b>	<b>5,000,000</b>  <b>5,000,000</b>  <b>5,000,000</b>  <b>25,000</b>  <b>500,000</b>
<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> DESCRIBED AUTOMOBILES <input type="checkbox"/> ALL OWNED AUTOMOBILES <input type="checkbox"/> LEASED AUTOMOBILES ** ** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE				BODILY INJURY AND PROPERTY DAMAGE COMBINED BODILY INJURY (PER PERSON) BODILY INJURY (PER ACCIDENT) PROPERTY DAMAGE		
<b>EXCESS LIABILITY</b> <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>				EACH OCCURRENCE AGGREGATE		
<b>OTHER LIABILITY (SPECIFY)</b> <input checked="" type="checkbox"/> <b>Professional Liability</b> <input type="checkbox"/> <input type="checkbox"/>	<b>Beazley Canada Limited</b> <b>18601331</b>	<b>2024/3/16</b>	<b>2025/3/16</b>	<b>E&amp;O</b>	<b>5,000</b>	<b>4,000,000</b>

5. CANCELLATION
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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 above, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS	7. ADDITIONAL INSURED NAME AND MAILING ADDRESS (but only with respect to the operations of the Named Insured)
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<b>Paisley Partners Inc.</b>	<b>To Whom It May Concern</b>
<b>4100 Yonge St., Suite 415</b>	
<b>Toronto, ON</b>	
	POSTAL CODE <b>M2P 2B5</b>
<b>BROKER CLIENT ID: FORTENV-01</b>	POSTAL CODE

8. CERTIFICATE AUTHORIZATION	
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ISSUER <b>Paisley Partners Inc.</b>	CONTACT NUMBER(S) TYPE <b>Phone</b> NO. <b>(416) 510-1177</b> TYPE <b>Fax</b> NO. <b>(416) 862-2416</b>
AUTHORIZED REPRESENTATIVE <b>Rosalie Dinkin, CAIB</b>	TYPE NO. TYPE NO.

SIGNATURE OF AUTHORIZED REPRESENTATIVE <i>Rosalie Dinkin</i>	DATE <b>2024/2/29</b>	EMAIL ADDRESS
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