

THANK YOU FOR INSURING WITH ECONOMICAL MUTUAL



INSURANCE ACCOUNT NO. 1672561

ECONOPAY

MONITARIO TECHNICAL SERVICES INC.
10 ALPINE CRT
R.R. 4
CAMBRIDGE, ON N1R 5S5

ACCOUNT STATEMENT

DATE JAN.17 2006

POLICY NO: 4726873P

EXPIRY DATE: MAR.11 2007

EFFECTIVE DATE	DESCRIPTION OF ACTIVITY	PREMIUMS	NUMBER OF MONTHLY WITHDRAWALS	REVISED MONTHLY PREMIUM	SALES TAX	SERVICE CHARGE	MONTHLY WITHDRAWAL	
MAR.11 2006	COMM. PROPERTY RENEWAL 4726873 POLICY BALANCE	\$2,716.00	12	\$226.34	\$18.11	\$6.79	\$251.24	
THE WITHDRAWAL ON MAR.22 2006 WILL BE \$251.24								
	POLICY NUMBER	EXPIRY DATE	REMAINING MONTHLY WITHDRAWALS	MONTHLY PREMIUM	SALES TAX	SERVICE CHARGE	MONTHLY WITHDRAWAL	
	4726873	MAR.11 2007	COMM-PRP	12	\$226.34	\$18.11	\$6.79	\$251.24
							MONTHLY WITHDRAWALS FROM MAR.22 2006 >>> \$251.24	

FOR PROFESSIONAL SERVICE AND ADVICE ON COVERAGE, CHANGES, OR CLAIMS CONTACT YOUR BROKER.

DONOVAN INSURANCE BROKERS INC.

519-886-3150

72 REGINA STREET NORTH
WATERLOO, ONTARIO
N2J 3A5

#8180

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K-W

O2208 06/01/17


Economical Mutual Insurance Company

(HEREINAFTER CALLED THE INSURER)

Business Insurance Policy

POLICY NO. 004726873 P

NAME OF INSURED
MONITARIO TECHNICAL SERVICES INC.
POSTAL ADDRESS OF INSURED
**10 ALPINE CRT
R.R. 4
CAMBRIDGE, ONT
N1R 5S5**
BROKER / AGENT
08180
**DONOVAN INSURANCE BROKERS INC.
WATERLOO, ONTARIO N2J 3A5
(519) 886-3150**
INSURANCE PERIOD
FROM
TO
TOTAL PREMIUM FOR THIS

 12:01 A.M. Standard Time at
the Postal Address of the
Named Insured as stated herein

11 03 2006
Day Mo. Year

11 03 2007
Day Mo. Year

RENEWAL
\$ 2,716
Payable in monthly installments: Acct. No. 3872561

In return for the payment of the premium the Policy Number indicated is renewed for Insurance period stated. The wordings attached replace existing Riders. Please contact your Broker if you require an explanation of coverage.

Additional Insured Relative to :
Coverage B, C, D, E, F, G, H, I
**THE REGIONAL MUNICIPALITY OF NIAGARA
PO BOX 1042
STN MAIN
THOROLD, ONT
L2V 4T7**
Coverage B, C, D, E, F, G, H, I
**LEFARGE CANADA INC. ITS AFFILIATES &
SUBSIDIARIES, BATH PLANT
PO BOX 160
HWY 33
BATH, ONT
K0H 1G0**
COVERAGES:

FORM	CO-INS	DEDUCTIBLE	LIMIT	RATE	PREMIUM
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A MISCELLANEOUS PROPERTY FLOATER - BROAD FORM

FLUOROMETRE WATER ANALYSING UNIT KIT, S/N 05989

1784	100 %	500	15,000		Included
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B COMMERCIAL GENERAL LIABILITY

OPERATIONS: DESIGN & INSTALLATION OF WATER FLOW METER SYSTEMS

2294		1,000	2,000,000		Included
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AGGREGATE

2,000,000
HBOAR 17 01 2006

THIS POLICY CONTAINS A CLAUSE(S) THAT MAY LIMIT THE AMOUNT PAYABLE



Economical Mutual Insurance Company

(HEREINAFTER CALLED THE INSURER)

Business Insurance Policy

POLICY NO. 004726873 P

COVERAGES:

	FORM	CO-INS	DEDUCTIBLE	LIMIT	RATE	PREMIUM
C PERSONAL INJURY LIABILITY	2294			2,000,000		Included
D MEDICAL PAYMENTS ANY ONE PERSON	2294			25,000		Included
E TENANTS LEGAL LIABILITY ANY ONE LOCATION	2294		1,000	100,000		Included
F HEALTH HAZARD EXCLUSION	2338			Included		Included
G ADDITIONAL INSURED ENDORSEMENT	2069			Included		Included
H TOTAL POLLUTION EXCLUSION	2326			Included		Included
I NON-OWNED AUTOMOBILE LIABILITY	6063			2,000,000		Included

Total Renewal Premium \$ 2,716

PLEASE SIGN ONE COPY TO ACKNOWLEDGE CHANGES AND RETURN

Feb 11/06