

PLACE STAPLE HERE



Insurance Corporation of British Columbia (the Corporation)

Owner's Certificate of Insurance and Vehicle Licence

Transaction Timestamp 20201110114026

Owner's BC Driver's Licence Number

Owner BAGRI BROS ENTERPRISES INC. 13385 61A AVE SURREY BC V3X 1L9

Certificate Number 6Q.O4T Effective Date 01Dec2020 Expiry Date 30Nov2021 Registration Number 13386323 Licence Plate Number 51030J Decal Number 00426929 VIN 2V9CS53406S012868 Unit Number 53564 Vehicle Inspection Decal FL38015 Vehicle Inspection Expiry 31Jul2021 NSC Number NOT\*REQD Transaction Type RENEW Agency Number 63781 Document Number 26P87JPP



Proof of Insurance

The owner and/or the operator of the vehicle described herein is insured against liability for bodily injury and property damage by reason of the operation of such vehicle. The coverage provided by this certificate also satisfies the minimum limits set out by the respective legislation governing vehicle insurance in any area of Canada and the USA.

This document is to be signed and carried in the insured vehicle as proof of insurance.

Vehicle Use Business or commercial use.

Declaration of Declaration of principal driver not permitted for selected rate class.

Principal Driver

Conditional Factor

By signing here, you:

- apply for a Vehicle Licence and Registration under the Motor Vehicle Act or Commercial Transport Act;
• apply for an Owner's Certificate of Insurance under the Insurance (Vehicle) Act and Regulation (the Regulation);
• apply for optional insurance for which a premium is shown, in accordance with the terms and conditions of the ICBC Autoplan Optional Policy (the Optional Policy);
• if optional insurance is purchased, accept delivery of a copy of the Optional Policy by viewing it at www.icbc.com/optionalpolicy, or acknowledge receipt of a copy of the Optional Policy;
• certify that the driver is correct for all new plate, renewal transactions, and for adding or removing drivers;
• certify that coverage, use, territory and where applicable, location address are correct;
• acknowledge that the description of vehicle use set out is a summary of permitted uses in the indicated rate class and that complete details are available to you from your Autoplan agent or ICBC;
• certify that the vehicle is not currently required to be registered and licensed in another jurisdiction;
• certify that you, if under 18 years of age, have the consent of a parent or (legal) guardian to license and register this vehicle;
• certify that all information on all pages of this form is true and agree that you are responsible for any inaccuracies on any page or pages of this form.

Under section 75 of the Insurance (Vehicle) Act, your claim is invalid if at any time you fail to provide complete and accurate information, violate a term or condition of your policy or commit fraud. This is a summary. For full information, see section 75 of the Insurance (Vehicle) Act.

If the lessee signs this form, the lessee agrees to be jointly and severally liable with the lessor for all premium or premium-related debt.

NOT VALID UNLESS STAMPED BY AUTHORIZED ISSUING OFFICE

63781 NOV 10 2020

Customer Copy Signature(s) Not Required

SIGNATURE OF OWNER

Customer Copy Signature(s) Not Required

SIGNATURE OF OWNER



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Vehicle Registration

Registered Owner

BAGRI BROS ENTERPRISES INC. 13385 61A AVE SURREY BC V3X 1L9

Number of Owners 1

This Certificate must be carried in the vehicle. This Certificate must be signed by the owner as seller if the vehicle is sold.

When you sell the vehicle, the buyer must take the Registration and submit it with an application for transfer within 10 days of the purchase. Contact your Autoplan agent for details.

Certificate Number 6Q.O4T Registration Number 13386323 Licence Plate Number 51030J Year 2006 Make Max atlas Model Body Style FlatDeckTrailerHeavy VIC DDDDFD6 Colour Red VIN 2V9CS53406S012868 Fuel Type Net Weight (kg) GVW (kg)/Disp. (cc) COMTLR Seating Capacity Vehicle Type COMMERCIAL TRAILER Anti-Theft Device Vehicle Status NORMAL Import Code CANADIAN IMPORT Right-Hand Drive NO ORV NO

SIGNATURE OF OWNER

SIGNATURE OF OWNER



Insurance Corporation  
of British Columbia  
(the Corporation)

# Owner's Certificate of Insurance and Vehicle Licence

Transaction Timestamp 20201110114026

**Owner** BAGRI BROS ENTERPRISES INC.

**Certificate No.** 6Q.04T  
**Plate No.** 51030J

**Effective Date** 01Dec2020  
**Expiry Date** 30Nov2021

Location address means the place where a vehicle is kept when not in use. Your location address is used to determine your territory and premiums. Complete details about your territory are available from your Autoplan agent or ICBC.

## Coverages, Fees and Premiums

Coverages			Your Cost
<b>Basic</b> As per Insurance (Vehicle) Act and Regulation	<b>Territory</b> L, E, N, X, R, V, S, Y, P, G, F, H, W, D <b>Rate Class</b> 514		\$119
<b>Third Party Liability</b> (Regulation, Part 6) (Optional Policy, Division 4)	<b>Limit</b> \$2,000,000		\$47
<b>Comprehensive</b> (Optional Policy, Division 5)	<b>Deductible</b> \$300**	<b>Declared Value</b> \$11,000.00	\$100
** Comprehensive coverage with a \$300 deductible includes a \$200 deductible for any claim for windshield damage caused by missiles or flying objects.			<b>Annual Insurance Total</b>
			\$266

**Customer Copy**  
**Signature(s) Not Required**  
SIGNATURE OF CUSTOMER

**Customer Copy**  
**Signature(s) Not Required**  
SIGNATURE OF CUSTOMER

**Customer Copy**  
**Signature(s) Not Required**  
SIGNATURE OF AGENT

**Agent Comments**  
TERR/RC/COV/DEC VAL AS PER CLIENT,COLL DECLINED.

**Annual Licence Fee** \$32.00

**Total Amount Due** \$298.00

**Total Paid** \$0.00

**Amount Financed** \$298.00

**Applicable Tax Situation** PST paid to seller (registrant)  
**Seller PST Number** 10005016



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## Payment Plan Agreement

Transaction Timestamp 20201110114026

**Account Holder Name and Address**  
BAGRI BROS ENTERPRISES INC.  
13385 61A AVE, SURREY, BC V3X 1L9

**Plan Number** 6Q.O4T  
**Policy Effective Date** 01Dec2020  
**Policy Expiry Date** 30Nov2021  
**Licence Plate Number** 51030J

**Account Holder Financial Institution**  
Branch 16170 - 809      **Account** 210456806

<b>Insurance Premiums</b>	\$298.00	<b>Payment Frequency</b>	Monthly
<b>Finance Fee</b>	\$7.44	<b>Finance Rate</b>	2.50%
<b>Total</b>	\$305.44	<b>APR Rate</b>	4.61%

**Payment Plan Schedule:**

Withdrawal Date	Amount Due	Withdrawal Date	Amount Due
01Dec2020	\$25.49	01Jun2021	\$25.45
04Jan2021	\$25.45	02Jul2021	\$25.45
01Feb2021	\$25.45	02Aug2021	\$25.45
01Mar2021	\$25.45	01Sep2021	\$25.45
01Apr2021	\$25.45	01Oct2021	\$25.45
03May2021	\$25.45	01Nov2021	\$25.45

Note: We will initiate a withdrawal on the dates indicated above. This is not a loan but a payment plan.

By signing here, you (the account holder):

- understand and accept that Insurance Premiums will include an enrollment fee for new payment plan participants.
- authorize ICBC to withdraw funds from your account in accordance with the "Payment Plan Schedule" described above (plus any necessary withdrawal and deposit adjustments) in payment of amounts due to ICBC.
- understand and agree the total amount collected will not exceed the total payment plan amount, however it is possible that small differences due to rounding may arise for payments.
- agree to accept this agreement or an amended document or receipt as pre-notification of the amounts and dates of withdrawals.
- understand and accept the attached terms and conditions of this Payment Plan Agreement.
- agree that your Financial Institution may process debits against your account in accordance with the rules of the Canadian Payments Association.
- agree to attach a specimen cheque marked "VOID" to this pre-authorized debit (PAD) Agreement for an enrollment or change of financial information.
- understand and accept that an additional \$18 fee may be applied to each payment withdrawal transacted that fails and becomes due, without notice to you.
- understand and agree that ICBC may provide to or request your credit information from any credit bureau or reporting agency in accordance with the Business Practices and Consumer Protection Act.
- certify that all the information shown on this agreement is true and correct.

**Customer Copy  
Signature(s) Not Required**

\_\_\_\_\_  
AUTHORIZED SIGNATURE(S)

Thank you for choosing ICBC payment plan.



BRITISH COLUMBIA

Ministry of Transportation and Infrastructure
Commercial Vehicle Inspection Report

FINAL INSPECTION CONFIRMATION NUMBER 15579302

DECAL NUMBER FQ15679

DECAL EXPIRY DATE 31 AUG 2022

INSPECTION RESULT: Pass
INSPECTION TYPE: Complete
REASON FOR INSPECTION: Annual
COLLISION REPAIR FACILITY:

WORK ORDER #
INSPECTION START DATE 07 AUG 2021 07:25
INSPECTION COMPLETE DATE 07 AUG 2021 09:28

REASON NOTE:
TECHNICIAN NAME:
PHONE #:

INSPECTOR'S NUMBER: 201923
INSPECTOR'S NAME: SIDHU, PAWANPREET
LICENCE EXPIRY DATE: 30-APR-2022
FACILITY NUMBER: S11850
FACILITY NAME: METRO TRUCK AND TRAILER REPAIR
INSPECTION CLASS: 3 - Trailer and semi-trailer

OWNER/LESSEE: BAGRI BROS ENTERPRISES INC.
ADDRESS: 13385 61A AVE
CITY: Surrey PROV: BC POSTAL CODE: V3X1L9
REGISTRATION #: 13386323 VEH. JURISDICTION: BC PLATE: 51030J
YEAR: 2006 MAKE: MAX ATLAS MODEL:
BODY STYLE: FLDCK VIN: 2V9CS53406S012868
ODOMETER: KM FUEL TYPE:
UNIT/FLEET #: 53564 BRAKE TYPE: Air

"F" Failed "R" Repaired Same Day "P" Passed "PC" Passed With Caution "O" Out Of Service "NA" Not Applicable

Table with 11 sections (Power Train, Suspension, Hydraulic Brakes, Air Brakes, Steering, Instruments, Lamps, Electrical System, Body & Frame, Tires & Wheels, Couplers & Hitches, Other Vehicle Components) and inspection criteria (Pressure Fuel, Air Brake Chamber, Air Brake Camshaft, Brake Lining/Pad, Rotor/Drum).

General Inspection Comments:

Inspector's Name SIDHU, PAWANPREET

Signature

Handwritten signature of Sidhu Pawanpreet

The Inspector's signature above is certification that this vehicle has been inspected to the requirements of the Motor Vehicle Act and Regulations.

NOTICE: KEEP THIS VEHICLE INSPECTION REPORT WITH VEHICLE REGISTRATION

The personal information collected on this form is collected under the authority of section 216 of the Motor Vehicle Act and Division 25 of the Motor Vehicle Act Regulations. It is collected for the purpose of processing this vehicle inspection and for generally administering the Vehicle Inspection Program and the National Safety Code (e.g. regulating carriers, authorized inspectors, and designated inspection facilities). If you have any questions about the collection of this information, you may contact the Sr. Manager, NSC/VIP at the Commercial Vehicle Safety Enforcement Branch, by writing to P.O. Box 9250, Stn Prov. Gov't, Victoria, BC V8W 9J2, by e-mailing to vehicle.inspections@gov.bc.ca or calling 250-952-0577.