

**REGISTERED PROFESSIONAL'S
PROOF OF INSURANCE
(FORM 2)**

BUILDING DIVISION inspections@langleycity.ca 604-514-2804

City of Langley
20399 Douglas Crescent
Langley, BC V3A 4B3

Attention: Chief Building Inspector:

RE : (address of project)

The undersigned hereby gives Assurance that:

- I have fulfilled my obligation to obtain a policy of professional liability insurance as outlined in section 15.3 of the Building and Plumbing Bylaw, 2003, No. 2498;
- I have enclosed a copy of my certificate of insurance indicating the particular of such coverage;
- I am a registered professional as defined in the current edition of the British Columbia Building Code;
- I will notify the Building Official immediately if this insurance coverage is reduced or terminated at any time during construction.

Name of Registered Professional (please print)

[affix seal]

Signature of Registered Professional

Date

Email address: _____

Name of Firm

Permit to Practice # _____