CERTIFICATE OF THE OFFICER
Regulation 7/00: Unfair or Deceptive Acts or Practices

I, _____, _____
(Name of Officer) *(Office held)*

of _____ ("the Insurer")
(Official name of company or group of companies)

CERTIFY THAT:

1. I have informed myself in all material respects of the business practices and procedures followed by the Insurer, including those concerning rates and risk classification systems, underwriting rules, quoting and renewal practices and application-processing practices, and regulatory compliance systems as at the date this certificate is signed.

2. Except for any circumstances reported to the Financial Services Commission of Ontario no later than August 13, 2010, I am satisfied that the Insurer's business practices, including without limitation the rates and risk classification systems implemented on its computer systems, the underwriting rules, quoting and renewal practices and application-processing practices applied and communicated to staff and intermediaries are, and have been since September 1, 2010, those that have been approved or authorized by the Superintendent of Financial Services as applicable, and fully compliant with Ontario Regulation 7/00: Unfair or Deceptive Acts or Practices, as amended.

_____ _____
Signature of Officer *Date, Location*