

This Declarations Page replaces and supercedes any preceding numbered Common Policy Declarations bearing the same policy number.

Policy No.	Declarations No.	Issue Date	Agent	County
65-3-1282816	07 Rewrite	07-02-91 md/4047v	45F6	45-1
ITEM 1. NAMED INSURED AND MAILING ADDRESS		MORTGAGEE NAME AND ADDRESS		

92006427 Boyle, Timothy
 Boyle's Remodeling & Construction
 2026 Schrage Ave.
 Whiting, IN 46394-1340

See Commercial Property Declarations page for description of Insured Property.

ITEM 2. POLICY PERIOD
 08-24-91 to 03-26-94 at 12:01 a.m. Standard Time at your Mailing Address shown above

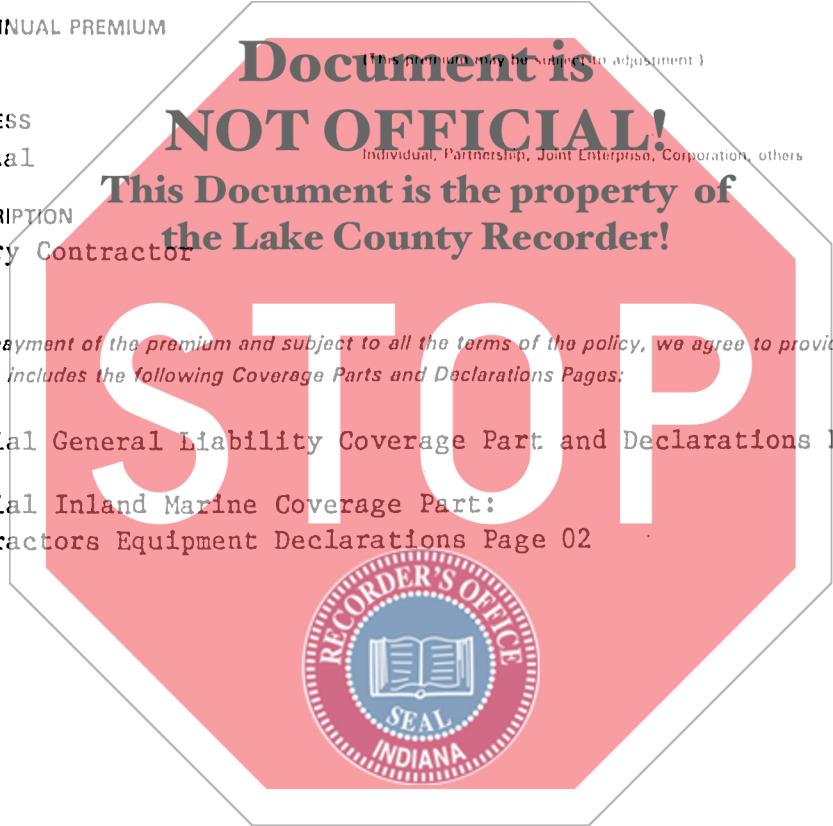
ITEM 3. PROVISIONAL ANNUAL PREMIUM
 \$ 750.00

ITEM 4. FORM OF BUSINESS
 Individual

ITEM 5. BUSINESS DESCRIPTION
 Carpentry Contractor

ITEM 6. COVERAGES
In return for the payment of the premium and subject to all the terms of the policy, we agree to provide the insurance as stated in the policy. The policy includes the following Coverage Parts and Declarations Pages:

Commercial General Liability Coverage Part and Declarations Page 04
 Commercial Inland Marine Coverage Part:
 Contractors Equipment Declarations Page 02



STATE OF INDIANA
 FILED FOR RECORD
 JAN 31 11 58 AM '92
 RECORDER'S OFFICE

ITEM 7. FORMS AND ENDORSEMENTS THAT APPLY TO ALL COVERAGE PARTS
 06-825(12-88), IL 00 03(06-89), SEM 1

6-11-92