

ACORD. CERTIFICATE OF INSURANCE

CSR AJ ISSUE DATE (MM/DD/YY)
SUMMIT 02/07/96

PRODUCER
BRIGGS AGENCY, INC.
 4000 West Lincoln Highway
 P.O. Box 10768
 Merrillville IN 46411-0768

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

800-627-5566

INSURED

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SUMMIT CONSTRUCTION
DOUGLAS DERRY DBA
 3359 Wallhaven Court
 Crown Point IN 46307

COMPANIES AFFORDING COVERAGE

COMPANY LETTER **A** Maryland Insurance Group
 COMPANY LETTER **B**
 COMPANY LETTER **C**
 COMPANY LETTER **D**
 COMPANY LETTER **E**

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

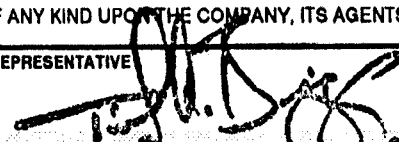
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A X	GENERAL LIABILITY	BINDER	02/05/96	02/05/97	GENERAL AGGREGATE \$ 1,000,000
	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG. \$ 1,000,000
	CLAIMS MADE X OCCUR.				PERSONAL & ADV. INJURY \$ 500,000
	OWNERS & CONTRACTOR'S PROT.				EACH OCCURRENCE \$ 500,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED. EXPENSE (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY				BODILY INJURY (Per person) \$
	ANY AUTO				BODILY INJURY (Per accident) \$
	ALL OWNED AUTOS				PROPERTY DAMAGE \$
	SCHEDULED AUTOS				
	EXCESS LIABILITY				EACH OCCURRENCE \$
	UMBRELLA FORM				AGGREGATE \$
	WORKER'S COMPENSATION				STATUTORY LIMITS
	AND				EACH ACCIDENT \$
	EMPLOYERS' LIABILITY				DISEASE— POLICY LIMIT \$
					DISEASE— EACH EMPLOYEE \$

OTHER

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
 General Contractor

CERTIFICATE HOLDER
LAKE CTY PLANNING COMMISSION
 2293 North Main Street
 Crown Point IN 46307

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE


LAKE COUNTY
 FILED FOR RECORD
 96 FEB - 8 AM 11:36
 MARGARET E. CLEVELAND
 RECORDER