



REVISED

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CERTIFICATE OF INSURANCE

THIS IS TO CERTIFY that policies in the name of:

NAMED INSURED AND ADDRESS

DeKoster Plumbing (Chuck DeKoster-Michael Bilka) 6660 W. 113th Ct. Crown Point, IN 46307

THIS CERTIFICATE OF INSURANCE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED

9608748

are in force as of 4/24/95 Date, as follows:

COMPANY Northfield Insurance Company

POLICY NUMBER CPP 162284

POLICY PERIOD: ( 12 ) MONTHS FROM: 4/3/95 TO: 4/3/96

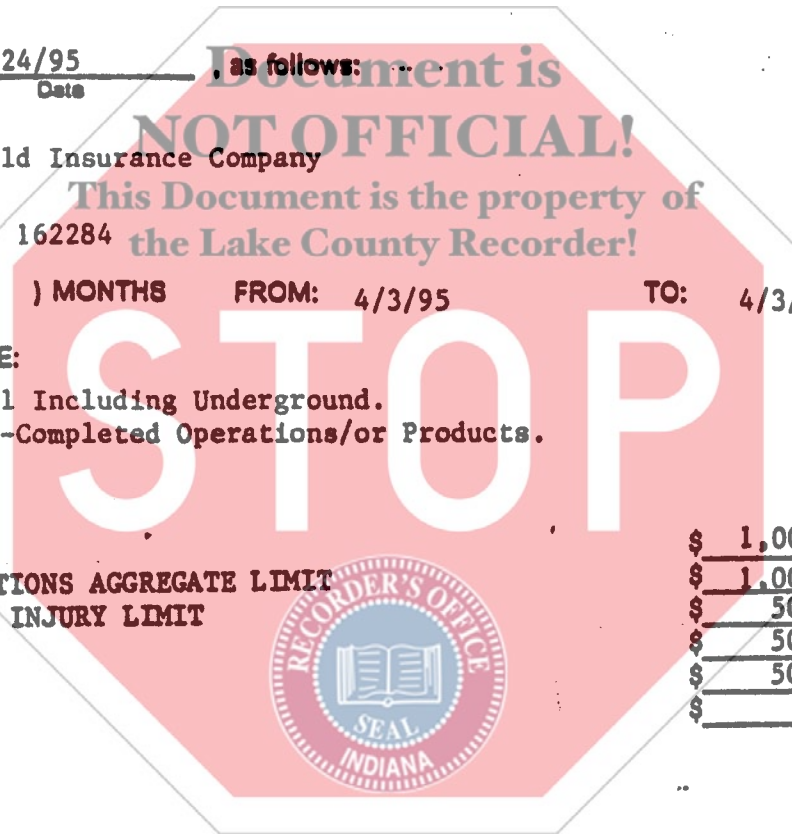
INSURANCE COVERAGE:

Plumbing Residential Including Underground. Premises Operations-Completed Operations/or Products.

LIMITS OF LIABILITY:

- GENERAL AGGREGATE LIMIT
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT
PERSONAL AND ADVERTISING INJURY LIMIT
EACH OCCURRENCE LIMIT
FIRE DAMAGE LIMIT
MEDICAL EXPENSE LIMIT

Table with 2 columns: Limit Type and Amount. Rows include General Aggregate Limit (\$1,000,000), Products-Completed Operations Aggregate Limit (\$1,000,000), Personal and Advertising Injury Limit (\$500,000), Each Occurrence Limit (\$500,000), Fire Damage Limit (\$500,000), and Medical Expense Limit (\$1,000).



STATE OF INDIANA LAKE COUNTY FILED FOR RECORD 96 MAR 22 PM 2: 10 MARGARET CLEVELAND RECORDER

In the event of any material change in or cancellation of said policies, the Company will try to give ten (10) days written notice to the party to whom this certificate is issued. Failure to give such notice will not impose any obligation or liability upon the Company. Limits Shown May Have Been Reduced by Paid Claims.

CERTIFICATE ISSUED TO:

NAME AND ADDRESS

Town of Schererville 833 W. Lincoln HWY Schererville, IN 46375

Handwritten signature R.F. Charski and date 9/20/96

Authorized Representative 4/24/95 jd