

Commercial Certificate of Insurance



FARMERS

Agency
 Name • Alana McGee
 & • 5770 Broadway Ste B
 Address • Merrillville, IN 46410-2692
 • 219-980-2583

Issue Date (MM/DD/YY) 09/29/2011

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 shown below.

St. 36 Dist. 60 Agent 32E

Insured
 Name • JIMB Roofing & Construction
 & • 499 W 53rd Place
 Address • Merrillville, IN 46410

Companies Providing Coverage:

- Company A Truck Insurance Exchange
- Company B Farmers Insurance Exchange
- Company C Mid-Century Insurance Company
- Company D

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) | Policy Limits |
|-------------------------------------|---|---------------|----------------------------------|-----------------------------------|---|
| B | General Liability <input checked="" type="checkbox"/> Commercial General Liability <input checked="" type="checkbox"/> - Occurrence Version Contractual - Incidental Only Owners & Contractors Prot. | 604797160 | 12/27/2010 | 12/27/2011 | General Aggregate Products-Comp/OPS Aggregate \$ 2,000,000 Personal & Advertising Injury Each Occurrence \$ 1,000,000 Fire Damage (Any one fire) \$ 100,000 Medical Expense (Any one person) \$ 5,000 |
| | Automobile Liability All Owned Commercial Autos <input checked="" type="checkbox"/> Scheduled Autos <input checked="" type="checkbox"/> Hired Autos <input checked="" type="checkbox"/> Non-Owned Autos Garage Liability | 604798166 | 12/27/2010 | 12/27/2011 | Combined Single Limit \$ 1,000,000 Bodily Injury (Per person) \$ Bodily Injury (Per accident) \$ Property Damage \$ Garage Aggregate \$ |
| | Umbrella Liability | | | | Limit \$ |
| <input checked="" type="checkbox"/> | Workers' Compensation and Employers' Liability | 186981166 | 12/27/2010 | 12/27/2011 | Statutory Each Accident \$ 500,000 Disease - Each Employee \$ 500,000 Disease - Policy Limit \$ 500,000 |



Description of Operations/Vehicles/Restrictions/Special Items:

Roofing & Construction

Certificate Holder

Name • Lake County Plan Commission
 & • 2293 N Main Street
 Address • 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 30 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

[Handwritten Signature]

12 cc
 RN CS
 Carr RM