/	ACORD CER	TIFIC	CATE OF LIA	RII	ITV IN	SHRA	KCE ($J \square $	\ \ / / / ·	AWDD/YYYY)	
Γ	THIS CERTIFICATE IS ISSUED AS A						11 - 11	ERTIFICATE		03/2012 R. THIS	
CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.											
1	IMPORTANT: If the certificate holder the terms and conditions of the policy certificate holder in lieu of such endor	, certain p	olicies may require an er	policy(ic	es) must be ent. A state	endorsed. If ment on this	SUBROGA certificate	TION IS WAI	VED, sub er rights	ject to to the	
PRODUCER					CONTACT NAME:						
CHARLES & CASASSA INSURANCE, INC. PO BOX 966					PHONE (219) 663-2600 FAX (A/C, No. Ext): (219) 662-1225						
CROWN POINT, IN 46308-0966					E-MAIL ADDRESS:						
					INSURER(S) AFFORDING COVERAGE						
L.,	J & J REMODELING, INC.	INSUR	INSURER A: AUTO-OWNERS INSURANCE COMPANY								
INSURED JULY A REMODELING, INC. 699 HEMLOCK DRIVE					INSURER B: WESTERN SURETY COMPANY						
	CROWN POINT, IN 46307		INSURER C.								
,					INSURER D: INSURER E:						
			INSURER F:								
CC	OVERAGES CEI		REVISION NUMBER:								
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.											
INSR LTR	EVEROSIONS AND CONDITIONS OF SOCH	POLICIES.	RIMITS SHOWN MAY HAVE	BEEN RE	DUCED BY PA	AID CLAIMS.					
LTR A	TYPE OF INSURANCE GENERAL LIABILITY	INSR WVC	9 POLICY NUMBER 004602-0927088	2	POLICY EFF (MM/DD/YYYY) 3/22/2012	POLICY EXP (MM/DD/YYYY) 3/22/2013		- CHIMIT		4 000 000	
,,	COMMERCIAL GENERAL LIABILITY		004002-092/1008	2	3/22/2012	3/22/2013	DAMAGE TO	RENTED	S	1,000,000 50,000	
	CLAIMS-MADE OCCUR						PREMISES (E		\$ \$	5,000	
							PERSONAL 8		s	1,000,000	
							GENERAL AG		s	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:		Door	100.0	nt ic			COMP/OPAGG	\$	1,000,000	
	POLICY PRO-		Docu		11t 12		3		\$ (7		
Α	AUTOMOBILE LIABILITY		42-270882-01	ות נת	3/22/2012	3/22/2013	(Ea accident)		31	1,000,000	
	ANY AUTO ALL OWNED SCHEDULED		1101 01	44	CIA			RY (Per person)	المحري		
	V AUTOS AUTOS NON-OWNED AUTOS AUTOS	Th	is Document	is th	ie pror	erty o	PROPERTY	RY (Per accident)	S_{ω}		
	AUTOS AUTOS		the Lake Co			~	(Per accident)	70	刘云 起己至	;	
	UMBREI AUABOL PEROCCUR		LIC DARE CO	, iii, y	MCCUI	uei:	EACH OCCUP		1		
	EXCESS LIAB ACE EFF OCCUR						AGGREGATE		<u>0</u> - 3	;	
	INGENTONALEYGBLANK							္ ယ			
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		001702-09029378	3	3/26/2012	3/26/2013	WC STA	TU- TH-			
	OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH AC	CIDENT	\$	100,000	
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE	- EA EMPLOYEE	\$ '	100,000	
В	L/P BOND - LAKE COUNTY	1	60406840		0/00/00/0			POLICY LIMIT	\$	500,000	
	÷		6040640		3/22/2012	3/22/2013	PENALTY			\$5,000	
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (Attach AC	CORD 404 Additional Provide								
SEN	ERAL CONTRACTOR, ROOFING, SID	ING AND	WINDOWS CONTRACTO	ieauie, ii m SR	ore space is requ	ired)					
			EQ.				77110.0	-			
THIS CERTIFICATE OF INSURANCE REPRESENTS COVERAGE CURRENTLY IN EFFECT //											
AMD MAY OF MAY NOT BE IN COMPLIANCE "											
WITH ANY WRITTEN CONTRACT. 12.00											
OSCO AND											
CANCELLATION 27304											
LAKE COUNTY PLAN COMMISSION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN										EFORE	
	2293 NORTH MAIN STREET			ACCO	RDANCE WITH	THE POLICY	PROVISIONS	- THEL DE		ouconf	
CROWN POINT, IN 46307 MUCCOM									- MUNIT		

ACORD 25 (2010/05)

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AUTHORIZED REPRESENTATIVE