

NOT AN OFFICIAL DOCUMENT

CERTIFICATE OF LIABILITY INSURANCE

American Family Insurance Company
 American Family Mutual Insurance Company if selection box is not checked.
 6000 American Pkwy Madison, Wisconsin 53783-0001

Insured's Name and Address

St. John Auto & Home
 9571 Wicker Avenue
 PO Box 21
 St John, IN 46373

Agent's Name, Address and Phone Number (Agt./Dist.)

John Hamilton (219) 763-2571
 6375 Melton Road
 Portage, IN 46368 (034/566)

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 listed below.

COVERAGES		POLICY DATE		LIMITS OF LIABILITY
TYPE OF INSURANCE	POLICY NUMBER	EFFECTIVE (Mo, Day, Yr)	EXPIRATION (Mo, Day, Yr)	
Homeowners/ Mobilehomeowners Liability				Body Injury and Property Damage Each Occurrence \$.000
Boatowners Liability				Body Injury and Property Damage Each Occurrence \$.000
Personal Umbrella Liability				Body Injury and Property Damage Each Occurrence \$.000
Farm/Ranch Liability				Farm Liability & Personal Liability Each Occurrence \$.000 Farm Employers Liability Each Occurrence \$.000
Workers Compensation and Employers Liability †	13-X34990-90-00	10/10/2012	10/10/2013	Statutory ***** Each Accident \$ 100,000 Disease - Each Employee \$ 100,000 Disease - Policy Limit \$ 500,000 General Aggregate (TT) \$ 2,000,000 Products - Completed Operations Aggregate (P) \$ 2,000,000
<input checked="" type="checkbox"/> General Liability <input type="checkbox"/> Commercial General Liability (occurrence) <input type="checkbox"/>	13-X34990-02-00	10/10/2012	10/10/2013	Personal and Advertising Injury \$ 1,000,000 Each Occurrence \$ 500,000 Damage to Printed Materials You \$ 25,000 Medical Expense (Any One Person) \$ 5,000
Businessowners Liability				Each Occurrence †† \$.000 Aggregate †† \$.000 Common Cause Limit \$.000 Aggregate Limit \$.000
Liquor Liability				Body Injury - Each Person \$ 100,000 Body Injury - Each Accident \$ 300,000 Property Damage \$ 100,000 Body Injury and Property Damage Combined \$.000
Automobile Liability <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Auto <input type="checkbox"/> Nonowned Autos <input type="checkbox"/>	13-X34990-01-00	10/10/2012	10/10/2013	Excess Liability <input type="checkbox"/> Commercial Blanket Excess <input type="checkbox"/>
Other (Miscellaneous Coverages)				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / RESTRICTIONS / SPECIAL ITEMS				

CERTIFICATE HOLDER'S NAME AND ADDRESS

• Lake County Planning Commission
 2293 Main St
 Crown Point, IN 46307

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AD
10/13

CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the company will endeavor to mail () days) written notice to the Certificate Holder named, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. 10 days unless different number of days shown.

This certifies coverage on the date of issue only. The above described policies are subject to cancellation in conformity with their terms and by the laws of the state of issue.

DATE ISSUED: 05/23/2013

AUTHORIZED REPRESENTATIVE: *John Hamilton*