

## **CERTIFICATE OF LIABILITY INSURANCE**

OP ID: MI
DATE (MM/DD/YYYY)

12/17/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. 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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

certificate holder in lieu of such endorsement(s).  PRODUCER Isu Bekan Insurance Group - Sc P.O.Box 568 Schererville, IN 46375-0568					CONTACT Mike Peterson					
					PHONE (A/C, No, Ext): 219-696-7321 FAX (A/C, No): 219-696-6038					
					E-MAIL ADDRESS: mpeterson@bekan.com					
	ssell Hamm			PRODUCER CUSTOMER ID	I& I	R_01	.00111			
				CUSTOMERID				4.00		
INS	URED J&J Roofing and					nsurance C	RDING COVERAGE		NAIC #	
	Insulating				ekiii i	risurance C	опірапу		24220	
	James Moes			INSURER B :						
	2121 Martha Street			INSURER C:						
Highland, IN 46322				INSURER D:						
	and the second of the second o	,/		INSURER E :						
L		· '		INSURER F:		·····				
_			E NUMBER:				REVISION NUM			
	THIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY R	S OF INSUI FOURFME	RANCE LISTED BELOW HA	OF ANY COM	UED TO	THE INSURE	ED NAMED ABOVE DOCUMENT WITH	E FOR THE	POLICY PERIOD	
( C	CERTIFICATE MAY BE ISSUED OR MAY	PERTAIN,	THE INSURANCE AFFORD	ED BY THE F	POLICIE	S DESCRIBE	D HEREIN IS SUE	BJECT TO A	ALL THE TERMS,	
ł .	EXCLUSIONS AND CONDITIONS OF SUCH									
INSF		ADDL SUBF	POLICY NUMBER	POLI (MM/D	CY EFF D/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS		
	GENERAL LIABILITY						EACH OCCURRENC		1,000,000	
Α	X COMMERCIAL GENERAL LIABILITY		CL0002650	02/0	1/2014	02/01/2015	DAMAGE TO RENTE PREMISES (Ea occu	rrence) \\D\$	100,000	
	CLAIMS-MADE X OCCUR						MED EXP (Any one p		5,000	
			Decree	4			PERSONAL & ADV II	NJURY \$	1,000,000	
	10.4048.0849.0		Docun	ient:	15		GENERAL AGGREG	ATE \$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:		TOW OF		- A -		PRODUCTS - COMP	OP AGG \$	2,000,000	
	X POLICY PRO- JECT LOC		NUTUE	KI (C)	A.	L		<b>S</b> \$		
	AUTOMOBILE LIABILITY		D	41			COMBINED SINGLE	LIMIT		
	ANY AUTO	I his	S Document is	s the pr	ope	rty of	(Ea accident)			
	ALL OWNED AUTOS	1	he Lake Cour	ity Rec	ord	er!	BODILY INJURY (Pe			
	SCHEDULED AUTOS				02 0		BODILY INJURY (Pe		in .	
	HIRED AUTOS						PROPERTY DAMAG (PER ACCIDENT)	E ω <sub>s</sub>		
	NON-OWNED AUTOS							\$		
	NON OWNED NOTOS							\$		
	UMBRELLA LIAB OCCUR						EACH OCCURRENC		· · · · · · · · · · · · · · · · · · ·	
	EXCESS LIAB CLAIMS-MADE									
	DEDUCTIBLE						AGGREGATE	<u> </u>		
	1,50.74						-	MA WARREN		
	RETENTION \$ WORKERS COMPENSATION						eposiți.	~ <b>*</b> 9	many and the same	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE		TITIL	IIII			WC STATU- TORY LIMITS	9		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A	TUNDE	US OF			E.L. EACH AGCIDEN	# S	The state of the s	
	if yes, describe under DESCRIPTION OF OPERATIONS below		E O.				E.L. DISEASET FA E	MPLOYEE \$	And the second	
	DESCRIPTION OF OPERATIONS below		£3/ E				E.L. DISEASE POLI	CYLIMIT S		
									Section 1992 (1992)	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (Attach	ACORD 101, Additional Remarks	Schedule, if more	space is	required)	19 (A)	<del>i</del>	Kaya Ca California California	
Res	sidential Roofing and Insul	ation (	Contractor	INA TITE		,	et all the second	Š,		
				Him						
					/					
CF	RTIFICATE HOLDER			CANCELLA	TION					
<u> </u>	MINIOAIL HOLDER		LAKECOU	CANCELLA	ATION					
			LANECOU	SHOULD A	NY OF	THE ABOVE D	ESCRIBED POLICI	ES BE CANO	CELLED BEFORE	
17.c0					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN					
	Lake County Plan Comm	ission	12-00	ACCORDA	NCE WI	TH THE POLIC	Y PROVISIONS.		Land 4 You again	
	2293 N. Main		CASH"	ALITI CONTROL		LITA TO				
	Crown Point, IN 46307	AUTHORIZED REPRESENTATIVE Russell Hamm								
			NO L						1	

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