

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/14/14

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 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). CONTACT NAME: PRODUCER 219-942-1028 The Bud Insurance Agency 615 West 3rd Street Hobart, IN 46342 MIKE BUDZIELEK PHONE (A/C, No. Ext): E-MAIL ADDRESS: PRODUCER FAX (A/C, No) 219-947-2189 CUSTOMER ID # SCOTT-2 INSURER(S) AFFORDING COVERAGE NAICH Scott and Sons Roofing LLC INSURER A : SURPLUS BROKERS INSURED 1235 Flower Hill Dr. INSURER B: Lowell, IN 46356 INSURER C INSURER D : INSURER E : NSURER F **COVERAGES** CERTIFICATE NUMBER: 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

SR TYPE OF INSURANCE ADDUSTER INSTRUMENT POLICY NUMBER POLICY EXP. LIMITS

GENERAL LIABILITY. GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RESTED PREMISES (Ea cocurre 1.000.000 07/16/13 07/16/14 X COMMERCIAL GENERAL LIABILITY 1300100949 100,000 CLAIMS MADE X OCCUR 5.000 MED EXP (Any one person) PERSONAL & ADV INJURY 1,000,000 2.0001.000 GENERAL AGGREGATE PRODUCTS - COMPLOP AGE GENT AGGREGATE LIMIT APPLIES PER **Jocument** is 2,000.000 PRO-JECT POUCY: W AUTOMOBILE LIABILITY 00 ANY AUTO BODILY INJURY (Per persits) ALL OWNED AUTOS This Document is the property of BODILY INJURY (Per achide SCHEDULED AUTOS PROPERTY DAMAGE the Lake County Recorder! HIRED AUTOS NON-OWNED AUTOS UMBRELLA LIAS EACH OCCURRENCE **OCCUR** EXCESS LIAB CLAMS-MAD 5 +47 DEDUCTIBLE TT D RETENTION \$2-TOR CHARLES WORKERS COMPENSATION The state of the s AND EMPLOYERS' LIABILITY ANY PROPRIETOR PARTNERS OFFICER MEMBER EXCLUDED (Mandatory in NH) EL OSFA - FA EMPLOYEE SO Fyes describe under DESCRIPTION OF OPERATIONS DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Admitted Remarks Soft Roofing Contractor its, if more space is required) **CERTIFICATE HOLDER** CANCELLATION LAKECOU SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. County of Lake Planning & Building Dept. 2293 Main Street AUTHORIZED REPRESENTATIVE Crown Point, IN 46307 MIKE BUDZIELEK

ACORD 25 (2009/09)

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