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CERTIFICATE OF LIABILITY INSURANCE

DATE (MW/DD/YYYY) 12/19/2014

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

CALUNC	ate noticer in lieu of such endorsement(s).			
PRODUCER	Lump insurance Agency inc	CONTACT NAME:		
	112 Mill Street	PHONE [A/C, No. Ext): [A/C, No.):	(AC, No);	
	PO Box 155 Lowell, IN 46356	ADCRESS:	**************************************	
Lowen, ny 40330	MOMENT IN A HODOG	Heurer(s) Affording Coverage	NAIC #	
	AAA	INSURER A: INDIANA FARMERS MUTUAL INSICO	22624	
INSURED Eric Goetz Master Builder Inc 17609 State Line Rd Lowell, IN 46356	11.11.1	INSURER B : CNA Surety	16270	
		Insurer C :		
		INSURER D:		
		MSURER E:		
		INSURER F:		
COVERA		REVISION NUMBER:		
THIS IS	TO SERVICY THAT THE POLICIES OF INCLIDANCE LISTED SELO	DUALIS REEN LOCKIER TO THE MOUNTAIN ALLIES AND THE RESERVE	Partie Co.	

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. ADDL SUER POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER LIMITS GENERAL LIABILITY CPP1004338 12/08/2014 12/08/2015 500,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (EN OCCUR COMMERCIAL GENERAL LIABILITY 100,000 CLAIMS-MADE OCCUR MED EXF (Any one person) 5,000 500,000 PERSONAL & ADV INJUST 1,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER:
POLICY PRO-1,000,000 PRODUCTS - COMPIOF AGG S \$ COMBINED SINGLE LIMIT (Ea accidant) BOOKY INJURY (Per per (07)) AUTOMOBILE LIABILITY 12/03/2015 500,000 ANY AUTO ALL OWNED AUTOS This Document is the property of SCHEDULED AUTOS NON-OWNED AUTOS BODILY INJURY (Peracottion \$ the Lake County Recorder! PROPERTY DAMAGE (Per accident) HIRED AUTOS د 1 5 \$ <u>O</u>] \$ UMBRELLA LIGH CUP1000279 05/19/2014 05/19/2015 1,000,000 OCCUR EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE **AGGREGATE** 3 DED RETENTION S 06/07/2014 05/07/2015 V WC STATU. WCP1001194 AND EMPLOYERS LIABILITY ANY PROPRIETORIA ARTNERIEXECUTIVE
OFFICER/MEMBER EXCLUDED?
(Mandatory in NH)
if yea, describe under
DESCRIPTION OF OPERATIONS below
Lake County Bond E.L. EACH ACCIDENT 500,000 500,000 E.L. DISEASE - EA EMPLOYEE 500,000 DISEASE - POLICY LIMIT 42756602 06/07/2014 | 06/07/2015 5000 E DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) 797 S General Contractor COPY 4 ****

CER	rij	FIC	ATI	E H	OLD	ER

Fax #: (219) 755-3712

Lake County Plan Commission 2293 N Main St Crown Point, IN 46307 CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION GATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE FOLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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ACORD 25 (2010/05)

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