

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 02/17/2017

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 flotder in fied of Such endorsement(s).		
PRODUCER	CONTACT MaryJo Nalezny	
Meyers Glaros Group	PHONE (A/C, No. Ext): (219) 865-6447 FAX (A/C, No): (219) 865-6443	
PO Box 717	E-MAIL ADDRESS: maryjo.nalezny@meyersglaros.com	
	INSURER(S) AFFORDING COVERAGE NAIC	-
Schererville IN 46375-0717	INSURER A: Meridian / State Auto 23353	<del></del>
INSURED	INSURER B: FirstComp Insurance	
MARK JURAN	INSURER C:	_
DBA: TITAN CONSTRUCTION	INSURER D:	-
3013 HESS DR		-i
HIGHLAND IN 46322		1
COVERAGES CERTIFICATE NUMBER: Master 201		
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 CITED 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 REDUGED BY PAID CLAIMS.		
INSR LTR TYPE OF INSURANCE ABDL SUER POLICYNUMBER	POLICY EFF POLICY EXP	
X COMMERCIAL GENERAL LIABILITY This Document is	EACH OCCURRENCE S 1,000	,000
A CLAIMS-MADE A OCCUP	DAMAGE TORENTED 300	0,000
the Leake Coun		0,000
	PERS MALE ADV INJURY 1,000	,000
GEN'L AGGREGATE LIMIT APPLIES PER:	GENERAL AGGREGATIA	
X POLICY PRO- JECT Loc	PROD S COMP/OP AGG 2,000	
OTHER:	MEDX TI CI TO	
AUTOMOBILE LIABILITY	COMPAND SINGLE LIMIT (1)	一
ANYAUTO	BODILY INURY (Per person) 13	
ALL OWNED SCHEDULED	BODILY INJURY (Per appident) \$	-
AUTOS AUTOS NON-OWNED AUTOS AUTOS	PROPERTY DAMAGE	
AUTOS AUTOS	(Per accident)	-
UMBRELLA LIAB OCCUP		
- CCCOR	EACH OCCURRENCE \$	
CLAID/S-MADE	AGGREGATE \$	
DED   RETENTION \$	PER OTH-	—
AND EMPLOYERS' LIABILITY		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?  Mandstory in NIN WC0152034-04	E.L. EACH ACCIDENT \$ 100	0,000
- (managery in terry		0,000
If yes, describe under DESCRIPTION OF OPERATIONS below  Mark Juran is Croined		0,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  Carpentry Contractor		
CERTIFICATE HOLDER	CANCELLATION	
Lake County Planning Commission 2293 North Main Street Crown Point, IN 46307	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  Larry Meyers/MN  Jaune D. Muyer	:
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