

CERTIFICATE OF INSURANCE

- THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY -

CERTIFICATE HOLDER COPY

NAME AND NUMBER OF AGENCY PREFERRED INSURANCE GROUP INC 43 S OHIO ST REMINGTON, IN 47977-8695 FF1769	DATE ISSUED 06/06/2017 NAME AND ADDRESS OF CERTIFICATE HOLDER LAKE COUNTY PLAN COMMISSION 2293 N MAIN ST CROWN POINT IN 46307-
NAME AND ADDRESS OF NAMED INSURED DUANE ELECTRIC INC * 673 N MADISON ST CROWN POINT IN 46307-8225	219-208-3018

2017 08649

This is to certify that policies, as indicated by Policy Number below, are in force for the Named Insured at the time that the certificate is being issued.

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS OF INSURANCE
GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY OCCURRENCE FORM GEN'L AGGREGATE LIMIT APPLIES PER: PROJECT ADDITIONAL INSURED	Q273121432	03/31/2017	03/31/2018	EACH OCCURRENCE \$ 100000
				FIRE DAMAGE (Any one premises) \$ 1000000
				MED EXP (Any one person) \$ 5000
				PERSONAL & ADV INJURY \$ 100000
				GENERAL AGGREGATE \$ 2000000
PRODUCTS-COMP/OP AGG \$ 2000000				
AUTOMOBILE LIABILITY ANY AUTO (OWNED, HIRED, NON-OWNED)	Q033131178	03/31/2017	03/31/2018	BODILY INJURY (EACH PERSON) \$
				BODILY INJURY (EACH ACCIDENT) \$
				PROPERTY DAMAGE \$
				BODILY INJURY AND PROPERTY DAMAGE COMBINED \$ 100000
WORKERS COMPENSATION AND EMPLOYERS LIABILITY	Q873100998	03/31/2017	03/31/2018	EACH OCCURRENCE
				AGGREGATE
				STATUTORY
OTHER				BODILY ACCIDENT \$ 100000 EACH ACCIDENT INJURY DISEASE \$ 500000 POLICY LIMIT BY DISEASE \$ 100000 EACH EMPLOYEE



STATE OF INDIANA
 LAKE COUNTY
 FILED FOR RECORDER
 2017 DEC 20 AM 11:11
 MICHAEL J. BENDER

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

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).

THIS CERTIFICATE IS ISSUED FOR INFORMATION PURPOSES ONLY AND CONFERS NO RIGHTS ON THE CERTIFICATE HOLDER. IT DOES NOT AFFIRMATIVELY OR NEGATIVELY LIST, AMEND, EXTEND OR OTHERWISE ALTER THE TERMS, EXCLUSIONS AND CONDITIONS OF INSURANCE COVERAGE CONTAINED IN THE POLICY(IES) INDICATED ABOVE. THE TERMS AND CONDITIONS OF THE POLICY(IES) GOVERN THE INSURANCE COVERAGE AS APPLIED TO ANY GIVEN SITUATION. LIMITS SHOWN MAY HAVE BEEN REDUCED BY CLAIMS PAID. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER AND CERTIFICATE HOLDER.

ERIE INSURANCE GROUP

SEE REVERSE SIDE

AUTHORIZED REPRESENTATIVE

Marc Cipriani

\$25 CASH GP