DATE (MM/DD/YYYY) 05/30/2019

CERTIFICATE OF LIABILITY INSURANCE

CORE

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 have ADDITIONAL INSURED provisions or 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). 219-769-4840 CONTACT Kathy Scheidt PRODUCER Briggs Agency, Inc. 4000 West Lincoln Highway PHONE (A/C, No, Ext): 219-769-4840 FAX (A/C, No.:219-769-0216 E-MAIL SALTHY Briggsagency.com Merrillville, IN 46410 Timothy A. Briggs INSURER(S) AFFORDING COVERAGE NAIC # 9 32905 INSURER A: Property-Owners Insurance INSURED D.T. Builders, Inc. 516 Foote Street, Suite #3 Crown Point, IN 46307 INSURER B: INSURER C: CI INSURER D (1) INSURER F CI 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. ADDL SUBR INSD WVD POLICY EFF POLICY EXP INSR POLICY NUMBER LIMITS TYPE OF INSURANCE 1,000,000 A COMMERCIAL GENERAL LIABILITY X **EACH OCCURRENCE** DAMAGE TO RENTED PREMISES (Ea occurrence) 300,000 CLAIMS-MADE X OCCUR 01/22/2019 01/22/2020 09211959 10,000 MED EXP (Any one person) **1,000,000** PERSONAL & ADV INJURY 2,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: 1,000,000 POLICY X PRO-PRODUCTS - COMP/OP AGG OTHER COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY ANY AUTO BODILY INJURY (Per person) OWNED AUTOS ONLY SCHEDULED PROPERTY DAMAGE (Per accident)
(Per accident) HIRED AUTOS ONLY NON-OWNED AUTOS ONLY 1.000.000 A X UMBRELLA LIAB X OCCUR EACH OCCURRENCE 1,000,000 4620927201 01/22/2019 01/22/2020 EXCESS LIAB CLAIMS-MADE AGGREGATE 10000 DED X RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 500,000 ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) 01/22/2019 01/22/2020 09134461 E.L. EACH ACCIDENT N/A 500,000 E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below 500,000 E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) General Contractor CANCELLATION CERTIFICATE HOLDER LAKE009 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lake County Planning Commission AUTHORIZED REPRESENTATIVE Planning & Bldg. Dept. 2293 N. Main St. Crown Point, IN 46307