OP ID: ATB

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/15/2020

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).

PRODUCER 219-769-4840 Briggs Agency, Inc. 4000 West Lincoln Highway Merrillville, IN 46410		CONTACT Kathy Scheidt			
		PHONE (A/C, No, Ext): 219-769-4840	FAX (AIC, No): 219-769-0216		
Merrillville, IN 46410			E-MAIL ADDRESS: Kathy@briggsagency.com		
And	drew Briggs		INSURER(S) AFFORDING COVE	RAGE NAIC #	
			INSURER A: Westfield Insurance Comp	any 24112	
INSURED Right Angle Services LLC 1120 E Michigan St Hammond, IN 46320			INSURER B: Travelers Property & Casu	alty	
			INSURER C:		
			INSURER D :		
			INSURER E :		
			INSURER 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. TIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.					
INSR	TYPE OF INSURANCE	ADDL SUBRINSD WVD POLICY NUMBER	POLICY EFF POLICY EXP	LIMITS	
Α	X COMMERCIAL GENERAL LIABILITY	This Document	s the property of EACHOCC		
	CLAIMS-MADE X OCCUR	GWP043178J	s the property of EACH OCC DAMAGE TO PREMISES	O RENTED \$ 500,000 (Ea occurrence)	
		the Lake Cou	nrv Recorder!	Any one person) \$ excluded	
			PERSONAL	& ADV INJURY \$ 1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:		GENERAL A	AGGREGATE \$ 2,000,000	
	POLICY X PRO: X LOC		PRODUCTS	s - COMP/OP AGG \$ 2,000,000	
	OTHER:			\$	
	AUTOMOBILE LIABILITY		COMBINED (Ea acciden	SINGLE LIMIT \$	

OWNED AUTOS ONLY HIRED NON-OWNED AUTOS ONLY NON-OWN

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Carpentry Contractor

ANY AUTO

2020-044616

2020 Jul 15

1:47 PM

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD MICHAEL B BROWN RECORDER

CERTIFICATE HOLDER	CANCELLATION
Lake County Planning	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Commission Planning & Bldg. Dept. 2293 N. Main St.  Crown Point, IN 46307	AUTHORIZED REPRESENTATIVE TIRA. Final

BODILY INJURY (Per person)