## NOT AN OFFICIAL DOCUMENT

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 PRODUCE, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) 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

ŧ	is certificate does not confer rights t	o the cert	fficate holder in lieu of su	ch endorsement(	s).	require air endorseme	inc. A statement on	
	DUCER			NAME: Jan Papp	as			
Meyers Giaros, LLC 8605 Broadway				PHONE (AC. No. Ext): 219-865-6447 (AC. No.): 219-865-6443			n: 219-865-6443	
Merrillville IN 46410				E-MAIL ADDRESS: jan.pappas@meyersglaros.com				
				IN	SURER(S) AFFO	RDING COVERAGE	NAIC #	
				INSURER A : Acuity			. 14184	
INSURED LAJCONS-01				INSURER B:				
L&J Construction, LLC 637 Redbud Lane				INSURER C:				
Lowell IN 46356				HSVRER D:				
				INSURER E:				
				INSURER F:				
		NUMBER: 27924652	REVISION NUMBER:					
THIS IS TO CERTIFY THAT THE POLICES 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.								
INSR LTR				POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS		
A	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR	4	ZF4542	4/7/2022	4/7/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 100,000	
		- 4	ノス			MED EXP (Any one person)	s 5,000	
						PERSONAL & ADV INJURY	s 1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000	
	POLICY X PRO- OTHER:		,6/7			PRODUCTS - COMP-OP AGE	s 2,000,000	
Α	AUTOMOBILE LIABILITY		ZF4542	4/7/2022	4/7/2023	COMBINED SINGLE LIMIT	\$ 1 000 000	
	X ANY AUTO	1	.(A)			BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY AUTOS NON-OWNED	1				BODILY INJURY (Per accider	5	
	X HIRED X NON-OWNED AUTOS ONLY		(	_1		PROPERTY DAMAGE (Per accident)	5	
						L. C.Signeson V	5	
A.	UMBRELLA LIAB X OCCUR		ZF4542	4/7/2022	4/7/2023	EACH OCCURRENCE	s 1,000,000	
	X EXCESS LIAB CLAIMS-MADE			YA		AGGREGATE	5 1.000 000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be stached if more space is required; Larry Espraynik is excluded from Worker's Compensation coverage. Pool Contractor

ZF4542

GINA PIMENTEL RECORDER

4/7/2022

4/7/2023

STATUTE

E.L. EACH ACCIDENT

2022-012380

E.L. DISEASE - EA EMPLOYEE \$ 1,000,000

E.L. DISEASE - POLICY LIMIT \$ 1,000,000

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

8:47 AM 2022 Apr 7

\$ 1,000,000

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

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DED X RETENTIONS O

If yes, describe under DESCRIPTION OF OPERATIONS below

AND EMPLOYERS' LIABILITY
ANYPROPRIETOR/PARTNER/EXECUTIVE
OFFICER/MEMBER EXCLUDED?