

NOT AN OFFICIAL DOCUMENT

CERTIFICATE OF LIABILITY INSURANCE

American Family Insurance Company
 American Family Mutual Insurance Company if selection box is not checked,
 6000 American Pkwy Madison, Wisconsin 53783-0001

Agent's Name, Address and Phone Number (Ag/L/Dis):

Insured's Name and Address:

Richard Michalowicz Agency (103/822)
 13159 West 143rd Street
 Homer Glen, IL 60491
 (708)301-9090

Deady Roofing & Construction, Inc.
 PO box 158
 Crete, IL 60417

This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder.
 This certificate does not amend, extend or alter the coverage afforded by the policies listed below.

COVERAGES
 This is to certify that 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.

TYPE OF INSURANCE	POLICY NUMBER	POLICY TYPE		LIMITS OF LIABILITY
		Effective (Mo,Day,Yr)	Expiration (Mo,Day,Yr)	
Homeowners/ Mobilehomeowners Liability Boatowners Liability				Bodily Injury and Property Damage Each Occurrence
Personal Umbrella Liability				Bodily Injury and Property Damage Each Occurrence
Farm/Ranch Liability				Farm & Personal Liability Each Occurrence Farm Employer's Liability Each Occurrence
Workers Compensation and Employers Liability +	12XB6987-92	05/01/2022	5/01/2023	Statutory **** Each Accident \$ 500,000 Disease - Each Employee \$ 500,000 Disease - Policy Limit \$ 500,000
General Liability <input checked="" type="checkbox"/> Commercial General Liability (occurrence) <input type="checkbox"/> <input type="checkbox"/>	12XH6692-01	5/01/2022	5/01/2023	General Aggregate \$4,000,000 Products - Completed Operations Aggregate \$4,000,000 Personal and Advertising Injury \$2,000,000 Each Occurrence \$2,000,000 Damage to Premises Rented to You \$100,000 Medical Expense (Any One Person) \$5,000
Businessowners Liability				Each Occurrence + + Aggregate + +
Liquor Liability				Common Cause Limit Aggregate Limit
Automobile Liability <input type="checkbox"/> Any Auto <input checked="" type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Nonowned Autos <input type="checkbox"/>	12XB6987-05	5/01/2022	5/01/2023	Bodily Injury - Each Person \$ 1,000,000 Bodily Injury - Each Accident \$ 1,000,000 Property Damage \$ 1,000,000 Bodily Injury & Property Damage Combined
Excess Liability <input type="checkbox"/> Commercial Blanket Excess <input type="checkbox"/>				Each Occurrence/Aggregate
Other (Miscellaneous Coverages)				
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS Scope of work: Roofing				+ The individual or partners shown as insured have elected to be covered as employees under this policy. + + Products-Completed Operations aggregate is equal to each occurrence limit and is included in policy aggregate.

CERTIFICATE HOLDER'S NAME AND ADDRESS	CANCELLATION		
<p>Lake County Planning Commission 2293 N Main St Crown Point, IN 46307</p> <p style="text-align: center;">GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY FILED FOR RECORD</p>	<p><input checked="" type="checkbox"/> Should any of the above described policies be canceled before the _____ (or to mail * (30 days) written _____ to mail such notice shall _____ to the company, its agents or _____ of days shown _____ only. The above described _____ with their terms and by the _____</p> <p style="text-align: center; font-size: 24px; font-weight: bold;">2022-020701</p> <p style="text-align: center;">1:44 PM 2022 Jun 29</p>		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">DATE ISSUED 06/29/2022</td> <td style="width: 50%;">AUTHORIZED REPRESENTATIVE Rick Michalowicz</td> </tr> </table>	DATE ISSUED 06/29/2022	AUTHORIZED REPRESENTATIVE Rick Michalowicz
DATE ISSUED 06/29/2022	AUTHORIZED REPRESENTATIVE Rick Michalowicz		

25
 ck. 10/26/20
 2c