- NOT AN OFFICIAL DOCUMENT

CERTIFICATE OF LIABILITY INSURANCE

12/28/2023 16:13

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 OF PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the cartificate holder is an ADDITIONAL INSURED, the policy(ise) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WANTED, subject to the terms and conditions of the policy, cortain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(e).

Watts, John 194 Deanna Dr. Ste A Lowell, IN 46356 ### See Columbia France Fra	1		1.	NAME:					
Lowell, IN 46356 ADDRESS ADDRESS ADDRESS ADDRESS APPROXICE CONTRACE	Watts, John			PHONE (A/C, No. Ext): (219) 690-1540 FAX (A/C, No):					
MISURED MISU			- 15	ADDRESS: John.Watts@infarmbureau.com					
INSURER A: United Farm Family Mutual Insurance Company 15288 INSURER A: INSURER B: I	Lo	well, IN 46356	Г						
INSURED INSU									
Insured Common Point, in 46307-9235 Insured Common Point, in 46307			-						
IBBURER D IBBU			ī						
Insurement Ins									
COVERAGES THIS IS TO CERTIFY THAT THE POLICES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ARROW FOR THE POLICES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ARROW FOR THE POLICY PERIOD NINICATED. NOTITED THAT THE POLICES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ARROW FOR THE POLICY PERIOD NINICATED. NOTITED THAT THE POLICES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ARROW FOR THE POLICY PERIOD NINICATED. NOTITED THAT THE POLICY PERIOD NINICATED NAMED ARROW THE POLICY PERIOD NINICATED NAMED ARROW THE POLICY PERIOD NINICATED NAMED NAMED NINICATED NINICATED NAMED NINICATED NAMED NAMED NINICATED NINICATED NAMED NINICATED NINICATED NAMED NINICATED NINICATED NAMED NINICATED NINICATED NINICATED NAMED NINICATED NINICAT									
THIS IS TO CERTIFY THAT THE POLICE PROJECTS OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INQUIRED NAMEDOR PROT THE POLICY PERIOD INDICATED. NOTIFICATION ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EXCLUSIONS AND CONDITIONS OF SUCH POLICY EXPENDING PROVIDED IN CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EXPENSION AND CONDITIONS OF SUCH POLICY EXPENSION AND CONDITIONS OF SUCH PO	CK	UWN PUINT, IN 46307-9235							
THIS IS TO CERTIFY THAT THE POLICES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD NINICATED. NOTHER DOCUMENT ANY RECURSIVENITY THAN OF CONDITION OF ANY RECURSIVENITY THAN OF CONDITION OF ANY PROPERTY OF THE POLICY PERIOD NINICATED. NOTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERFORM. THE RESULT OF THE POLICY PERIOD CONSTRUCTION OF SUCH PICLOSE. LIMITS SHOWN MAY HAVE BEEN REVOLUCES OF SOCIETIES HEREN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITION OF SUCH PICLOSE. LIMITS SHOWN MAY HAVE BEEN REVOLUCED BY PAID CLAMS. INTERIOR OF SUCH PICLOSE. LIMITS AND POLICY NUMBER COMMENCIAL LIMITATION OF THE POLICY PERIOD CLAMS. LIMITS OF THE POLICY PERIOD CLAMS. COMMENCIAL LIMITATION OF THE POLICY PERIOD CLAMS. LIMITS OF THE POLICY PERIOD CLAMS. COMMENCIAL LIMITATION OF THE POLICY PERIOD CLAMS. LIMITS OF THE POLICY PERIOD CLAMS. LIMITS OF THE POLICY PERIOD CLAMS. COMMENCIAL LIMITATION OF THE POLICY PERIOD CLAMS. LIMITS OF THE POLICY PERIO	CC	VERAGES CERTIFICATE NUMBER:				REVISION NUMBER:			
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EXECUSIONS AND CONDITIONS OF SUCH POLOCIES AFFORDED BY THE POLICIES DEGRED HEREN IS SUBJECT TO ALL THE TERMS, EXCUSIONS AND CONDITIONS OF SUCH POLOCIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAMS. The POLICIES DEGREE AND CONDITIONS OF SUCH POLICIES BY CONDITIONS OF SUCH POLICY POLICIES BY CONDITIONS OF SUCH POLICY POLICIES BY CONDITIONS OF SUCH POLICY P			OW HAVE	BEEN ISSUED TO			E POL	ICY PERIOD	
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. COMMERCIAL GENERAL LIBRATY COMMERCIAL GENERAL ADVISUAL PROPERTY 1,000,000 COMMERCIAL GENERAL GENERAL GENERA	Iι	NDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CON	DITION O	F ANY CONTRACT	OR OTHER I	DOCUMENT WITH RESPEC	T TO	WHICH THIS	
TYPE OF REMINANCE MINISTRUCTURE MINISTRUCT	1 9	ERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE A	FFORDE	D BY THE POLICIE	S DESCRIBE	D HEREIN IS SUBJECT TO	ALL 1	THE TERMS,	
COMMERCIAL GENERAL LABILITY CLAMS-MADE X OCCUR A GERT AGGREGATE LIMIT APPLIES PER POLICY SEE LOC OTHER ANY AUTO OWNED AUTOS ONLY X OWNED DED OR RETERMON \$ 1000 OWNED DED OR RETERMON \$ 10000 OWNED DED		EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MA							
CLAMS-MADE X OCCUR A GERL AGGREGATE LIMIT APPLIES PER: POLICY CONTINUE C	LTR		MBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	8		
A	1					EACH OCCURRENCE	\$ 1,000	0.000	
CORP. AGGREGATE LIMIT APPLES FER: CORP. 12/20/2023 12/20/2024	ı	CLAIMS-MADE X OCCUR				PREMISES (Ea occurrence)	\$100.0	000	
CEPIL AGOREGATE LIAM PAPILES PER: POLICY SEC	1			1		MED EXP (Any one person)	\$5,000)	
PRODUCT SECT LOC OTHER APPROPRIATE LAMBUTY PRODUCTS SCHEDULED LOCAL APPROPRIATE LOCAL LAMBUT PRODUCTS LOCAL LAMBUT PRODUCT	A	CPP8157056		12/20/2023	12/20/2024	PERSONAL & ADV INJURY	\$ 1,000	0.000	
CONSIDERATION OF OPERATIONS PRODUCT IN ACCIONDS SHOULD IN ACCIONDS SHOULD SHOUL			,			GENERAL AGGREGATE	\$2,000	0.000	
ANY AND COMED AND SCHEDULED CPR8157056 12/20/2023 12/20/2023 12/20/2024 12/20/2023 12/20/2024 12/20/2023 12/20/2024 12/20	1	POLICY PRO- JECT LOC				PRODUCTS - COMP/OP AGG	\$ 2,000	0,000	
A AVIGO ONLY X AUTOCONEY A AUTOCONEY X AUTOCONEY A BECCESS LIAB COLUMB CAMADE LOBEL GENERAL AUGUST COLUMB		OTHER:	0				\$		
ANY AUTO ONNESS CONTROL X SCHEDULED AUTOS ONLY X	Г	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$1,000	0.000	
AUTOS ONLY X AUTOS	l	ANY AUTO							
X UMBRELIA LIAM OCCUR EXCESS LIAB CLAMS-MADE UMB8604796 12/20/2023 12/20/2024 12	A	OWNED X SCHEDULED CPP8157056		12/20/2023	12/20/2024	BODILY INJURY (Per accident)	s		
A EXCESS LAB OCCUR A EXCESS LAB OCCUR A CLAMAS-MADE DED RETENTIONS \$ 1,000 000 WORKERS CORPERSATION ANY RECPRESENTIAL STATE OF THE PROPERTY O	1	HIRED W NON-OWNED					5		
A EXCESS LAB OCCUR CLAMS MADE CLAMS MADE DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required Scope of Business: General Contractor CERTIFICATE HOLDER Lake County Planning Commission 2293 N Main St Crown Point 46307-1867 LAKE COUNTY RECORDED TO THE POLICY PROVISIONS. BLOSSASE AB ABYLOYEE \$500,000 EL DISSASE -POLICY LIMIT \$500,000 EL DISSASE -POLIC	ĺ	AUTOS ONLY AUTOS ONLY		\mathcal{A}		(Per accident)			
A SCREETING STATE OF THE PLANS MADE DESCRIPTION OF OPERATIONS JULIAGE VIN		X UMBRELLALIAB OCCUP		4/		EACH OCCURRENCE	•		
DEC RETIFICATE HOLDER Lake County Planning Commission 273 N Man St Crown Point 46307-1867 Lake County Planning Commission 273 N Man St Crown Point 46307-1867 Lake County Planning Commission 275 N Man St Crown Point 46307-1867 Lake County Planning Commission 275 N Man St Crown Point 46307-1867 Lake County Planning Commission 275 N Man St Crown Point 46307-1867 Lake County Planning Commission 275 N Man St Crown Point 46307-1867 Lake County Planning Commission 275 N Man St Crown Point 46307-1867 Lake County Planning Commission 277 N Man St Crown Point 46307-1867 Lake County Planning Commission 277 N Man St Crown Point 46307-1867	A	H + 1 1 1 1		12/20/2023	12/20/2024			000	
WORRER COMPRISATION AND SHAFTORS JURGITY VIN A CHARGE COUNTY (STATUTE LINE) A CHARGE COUNTY (STATUTE LINE) BECCRIFTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) EXECUTED IN CORRESC. POLICY LIMIT 1 500,000 EX. DISEASE: POLICY LIMIT 1 500,0	ı			111,121	_	AGGREGATE		7,000	
A MATHORIZED REPRESENTATIVE BESCHPTICATE HOLDER CERTIFICATE HOLDER Lake County Planning Commission 2793 N Main St Crown Point 44:507-1867 Lake County Planning Commission 2793 N Main St Crown Point 44:507-1867 AUTHORIZED REPRESENTATIVE WE 8330215 12/20/2023 12/20/2023 12/20/2023 12/20/2023 12/20/2023 12/20/2023 12/20/2023 12/20/2023 12/20/2023 12/20/2023 12/20/2024 12/20/2023 12/20/2025 12/	\vdash	WORKERS COMPENSATION		-		, PER OTH-	•		
DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS Delow DESCRIPTION OF OPERATIONS / UDICIOUS / UDICI		AND EMPLOYERS' LIABILITY				T. C. Miller T. T. Miller			
DESCRIPTION OF OPERATIONS selow DESCRIPTION OF OPERATIONS Selow DESCRIPTION OF OPERATIONS JUDICATIONS / VEHICLES (ACORD 191, Additional Remarks Schedule, may be attached if more space is required) Scope of Business: General Contractor GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED CERTIFICATE HOLDER CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE TREESOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Watts, John	Α	OFFICER/MEMBER EXCLUDED? N/A WC 8330215		12/20/2023	12/20/2024				
DESCRIPTION OF OPERATIONS / LOCATIONS / VERICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space in required Scope of Business: General Contractor GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED CERTIFICATE HOLDER Lake County Planning Commission 2273 N Main St Crown Point 46307-1867 AUTHORIZED REPRESENTATIVE Watts, John		(Mandatory in NH)			'(\)				
Scope of Business: General Contractor GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED CERTIFICATE HOLDER Lake County Planning Commission 2273 N Main St Crown Point 46307-1867 Crown Point 46307-1867 GINA PIMENTEL 2024-001275 1:27 PM 2024 Jan 17 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. AUTHORIZED REPRESENTATIVE Watts, John	-	DÉSCRIPTION OF OPERATIONS below				E.L. DISEASE - POLICY LIMIT	\$ 500,0	000	
Scope of Business: General Contractor GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED CERTIFICATE HOLDER Lake County Planning Commission 2273 N Main St Crown Point 46307-1867 Crown Point 46307-1867 GINA PIMENTEL 2024-001275 1:27 PM 2024 Jan 17 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. AUTHORIZED REPRESENTATIVE Watts, John	1			1 1	,				
Scope of Business: General Contractor GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED CERTIFICATE HOLDER Lake County Planning Commission 2273 N Main St Crown Point 46307-1867 Crown Point 46307-1867 GINA PIMENTEL 2024-001275 1:27 PM 2024 Jan 17 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. AUTHORIZED REPRESENTATIVE Watts, John	1					VA			
Scope of Business: General Contractor GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED CERTIFICATE HOLDER Lake County Planning Commission 2273 N Main St Crown Point 46307-1867 Crown Point 46307-1867 GINA PIMENTEL 2024-001275 1:27 PM 2024 Jan 17 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. AUTHORIZED REPRESENTATIVE Watts, John	L					(0)			
GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED CANCELLATION CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE ACCORDANCE WITH THE POLICY PROVISIONS. AUTRORIZED REPRESENTATIVE Watts, John									
STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED 1:27 PM 2024 Jan 17 RECORDED AS PRESENTED 1:27 PM 2024 Jan 17 RECORDED AS PRESENTED 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. AUTHORIZED REPRESENTATIVE Walts, John									
STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED 1:27 PM 2024 Jan 17 RECORDED AS PRESENTED 1:27 PM 2024 Jan 17 RECORDED AS PRESENTED 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. AUTHORIZED REPRESENTATIVE Walts, John	GINA PIMENTEL 2024-001275								
LAKE COUNTY RECORDED AS PRESENTED CANCELLATION CANCELLATION CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTRORIZED REPRESENTATIVE Walts, John	RECORDER 2024-0012.								
LAKE COUNTY RECORDED AS PRESENTED CANCELLATION CANCELLATION CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTRORIZED REPRESENTATIVE Walts, John	STATE OF INDIANA								
CERTIFICATE HOLDER Lake County Planning Commission 2293 Nidnis 1 Crown Point 46307-1867		LAKE COUNTY 1:27 PW 2024 SAIL T							
CERTIFICATE HOLDER Lake County Planning Commission 2293 Nidnis 1 Crown Point 46307-1867		RECORDED AS PRESENTED							
Lake County Planning Commission 2273 N Main St Crown Point 46307-1867 256 277 278 278 380ULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Watts, John									
2293 N Main St Crown Point 46307-1867 25 CC Authorized Representative Walts, John									
Crown Paint 46307-1867 Crown Paint 46307-1867 AUTHORIZED REPRESENTATIVE Watts, John	1 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE							ED BEFORE	
Crown Paint 46307-1867 AUTHORIZED REPRESENTATIVE Watts, John								LIVERED IN	
Watts, John	Cro	wn Point 46307-1867	- 1						
Watts, John	ı	(' ('	17	AUTHORIZED REPRESE	NTATIVE	*****			
	1	iy 🕳							
© 1988-2015 ACORD CORPORATION All rights reserved	1	LD.	- 1						
	_	ts reserved							