

BLGRP



MM1093

DECLARATIONS

AGENT COPY

554

**ERIE INSURANCE EXCHANGE
HOMEPROTECTOR POLICY
CONDICOVER**

AMENDED DECLARATIONS 02 * *
EFFECTIVE 05/15/12 ATTACH THIS TO YOUR POLICY.

REASON FOR AMENDMENT - AMENDED MORTGAGEE - PRIMARY RESIDENCE

AGENT	ITEM 2. POLICY PERIOD	POLICY NUMBER
MM1093 BRADISH ASSOCIATES, LTD	03/01/12 TO 03/01/13	Q51 0122334 IL
ITEM 1. NAMED INSURED AND ADDRESS	ITEM 3. OTHER INTEREST	

JANICE L COSTA
1615 E CENTRAL RD UNIT 108A
ARLINGTON HEIGHTS IL
60005-3344

AS LISTED BELOW
OR ON REVERSE SIDE

AGENT - BRADISH ASSOCIATES, LTD 215 N. ARLINGTON HEIGHTS ROAD

AGENT PHONE - (847) 259-2400 ARLINGTON HTS. IL 60004 6055

COVERAGE BEGINS AND ENDS AT 12.01 AM STANDARD TIME AT THE LOCATION OF THE
INSURED PROPERTY. UNTIL TERMINATED, THIS POLICY WILL CONTINUE IN FORCE.

LOCATION OF RESIDENCE PREMISES IF OTHER THAN STATED IN ITEM 1 OR IF SPECIFIC
DESIGNATION IS NEEDED. ZIP CODE - 60005 COOK CO

PROPERTY INFORMATION - PRIMARY RESIDENCE, FIRE RESISTIVE, PROTECTION CLASS 2.
PROPERTY IS WITHIN 1000 FEET OF A FIRE HYDRANT AND WITHIN 2 MILES OF
A RESPONDING FIRE DEPARTMENT.

COVERAGE IS PROVIDED ONLY IF A SPECIFIC AMOUNT OF INSURANCE IS SHOWN.

SECTION I - PROPERTY PROTECTION	AMOUNT OF INSURANCE
DWELLING	NONE
OTHER STRUCTURES	NONE
PERSONAL PROPERTY	\$ 37,000
LOSS OF USE	LOSS SUSTAINED NOT TO EXCEED 12 CONSECUTIVE MONTHS

SECTION II - HOME AND FAMILY LIABILITY PROTECTION

PERSONAL LIABILITY - EACH OCCURRENCE	\$ 400,000
MEDICAL PAYMENTS TO OTHERS - EACH PERSON	\$ 2,000
NO DIFFERENCE IN PREMIUM DUE TO THE CHANGE	\$.00

SECTION I DEDUCTIBLE \$ 500.

APPLICABLE FORMS - 2006 02/01, HPHL 08/10, HPGT 06/04, UF9256 04/08, HPBD 02/01,
HPAAN 01/97, HPBV 02/01, HPFC 02/01, HPGW 12/08, HPBX 01/97, UF2106 04/08,
UF2609 01/11, UF4433 01/06, HPEW 09/10, UF2799 09/11.

PRIMARY RESIDENCE-MORTGAGEE

LN 0006117093
PNC BANK NA ISAOA ATIMA
P O BOX 1024
DAYTON OH 45401-1024

05/15/12