

# **CERTIFICATE OF INSURANCE**

<b>Producer</b>		<b>Agency Address</b>		<b>Phone Number and Fax Number</b>		
Program Insurance Group, Inc.		210 White Oak Court, Barrington, IL 60010		(P)847-277-8420 (F)888-276-3436		
<b>Named Insured</b>	Dana Condominium Association- 504 Condominium Units					
<b>Location of Premises</b>	Arlington Heights, IL 60005					
<b>CERTIFICATE HOLDER</b>						
<b>Name</b>						
<b>Address</b>						
<b>MASTER POLICY - PHILADELPHIA INSURANCE COMPANIES - POLICY # PHPK1012323- PROPERTY AND GENERAL LIABILITY</b>						
<b>PROPERTY INSURANCE (Bldgs)</b>		<b>Policy Type</b>		<b>Limits of General Liability</b>		
<b>Coverage Amount</b>	<input checked="" type="checkbox"/> Extended Replacement Cost					
\$153,481,729	SPECIAL FORM		EACH OCCURRENCE			
			\$1,000,000			
<b>Deductible</b>			GENERAL AGGREGATE			
			\$3,000,000			
\$10,000			PRODUCTS COMPLETED OPERATIONS			
				\$3,000,000		
				PERSONAL INJURY AND ADVERTISING		
				\$1,000,000		
				MEDICAL EXPENSE		
				\$5,000 ANY ONE PERSON		
<b>DIRECTORS AND OFFICERS LIABILITY- \$1,000,000 LIMIT - TRAVELERS INSURANCE COMPANIES; UMBRELLA LIABILITY-\$25,000,000 LIMIT- GREAT AMERICAN INSURANCE COMPANIES POLICY; ADDITIONAL COVERAGE -EMPLOYEE DISHONESTY = \$1,000,000 LIMIT-INCLUDES THE MGR &amp; MGT. FIRM, ORDINANCE OR LAW -INCLUDED; BOILER &amp; MACHINERY-INCLUDED</b>						
This policy does not include coverage for household contents or individual personal property of individual unit owners or individual unit owners personal liability. Consult the association's legal documents and IL state statute. The policy provides coverage to the original specifications of the unit.						
<b>UNIT OWNER MORTGAGEE</b>						
<b>1st Mortgagee</b>						
<b>Address</b>						
<b>Loan#</b>						
<b>2nd Mortgagee</b>						
<b>Address</b>						
<b>Loan#</b>						
<b>CERTIFICATE PERIOD</b>						
This certificate will remain in force from the inception of the policies until the policies are cancelled or expire.						
<b>POLICY EFFECTIVE DATE</b>	5/1/13	<input checked="" type="checkbox"/> 12:01 A.M.	<input type="checkbox"/> 12:00 Noon			
<b>POLICY EXPIRATION DATE</b>	5/1/14	<input checked="" type="checkbox"/> 12:01 A.M.	<input type="checkbox"/> 12:00 Noon			
Standard Time at the location of the insured premises						
<b>PROVISIONS/CANCELLATION</b>						
This form is not the contract of insurance, but attests that a policies as identified above have been issued. The provisions of the policies shall prevail in all respects.						
<b>Note to Mortgagee:</b>						
This certificate is issued as a matter of information only and confers no rights upon the certificate holder. The actual policies will prevail.						
Should any of the above policies be cancelled before expiration, the issuing company will endeavor to mail notice to the certificate holder; failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives						
William A. Blasch						
Authorized Agent/Representative					Date	