

This CONTINUATION Page With the Forms And Endorsements
Listed Below CONTINUES Your HOMEOWNERS POLICY.



554

INSURER: HARTFORD INSURANCE COMPANY OF ILLINOIS
200 WEST MADISON STREET, CHICAGO, ILLINOIS 60606

DECLARATIONS
CUST CTR POL PLAN

POLICY NO. 83 RBA290464 CC

Named Insured and
RESIDENCE PREMISES

BERNGEN DAWN R
1405 E CENTRAL 212B
ARLINGTON HEIGHTS IL 60005

RD

Policy Period 12:01 A.M. Standard Time
at the Residence Premises →

FROM 12-01-12 TO 12-01-13 TERM: 1 YEAR

Producer Name: MESIROW INSURANCE SERVICES INC

CODE: 555351

TOTAL POLICY PREMIUM: \$ 660.00

COVERAGE IS PROVIDED WHERE A LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE.

COVERAGES

LIMIT OF LIABILITY

SECTION I

| | |
|----------------------|------------|
| A. DWELLING | \$ 12,600 |
| B. OTHER STRUCTURES | \$ |
| C. PERSONAL PROPERTY | \$ 183,000 |
| D. LOSS OF USE | \$ 73,200 |

SECTION II

| | |
|--|------------|
| E. PERSONAL LIABILITY: EACH OCCURRENCE | \$ 300,000 |
| F. MEDICAL PAYMENTS TO OTHERS: EACH PERSON | \$ 1,000 |

DEDUCTIBLE - SECTION I: WE COVER ONLY THAT PART OF A LOSS OVER \$ 500

RATING INFORMATION: OWNER OCCUPIED FIRE RESISTIVE BUILDING WITH 88 APARTMENTS
STATE 12 TERR. 00012 PROTECTION CLASS 2
FIRE PROTECTION PROVIDER ARLINGTON HEIGHTS
WITHIN 1000 FEET OF A FIRE HYDRANT AND WITHIN 2 MILES OF A FIRE STATION
INSIDE CITY LIMITS PREMIUM GROUP 0.90

MESIROW INSURANCE SERVICES INC
COUNTERSIGNED BY -----AUTHORIZED AGENT

-----CONTINUED ON PAGE 2-

DECLARATIONS (CONTINUED)

POLICY NO. 83 RBA290464 CC

NAMED INSURED: BERNGEN DAWN R

FORMS AND ENDORSEMENTS NOW MADE PART OF THIS POLICY:

(ENTRIES ON ENDORSEMENTS MAY BE LEFT BLANK IF SHOWN ELSEWHERE IN THE POLICY)

| | | | | |
|--------------------------|-------|--|--------------------|-----------|
| HO 00 06 | 10 00 | UNIT OWNERS FORM | BASIC PREMIUM \$ | 548.00 |
| HO 04 96 | 10 00 | NO SECT II COV-HOME DAY CARE BUSINESS | PREMIUM | NIL |
| HW 01 03 | 06 03 | AMENDATORY ENDORSEMENT | PREMIUM | NIL |
| HW 01 07 | 06 03 | HOMEOWNERS POLICY POLLUTION EXCLUSION | PREMIUM | NIL |
| HW 01 47 | 06 12 | SPECIAL PROVISIONS - ILLINOIS | PREMIUM | NIL |
| HO 17 32 | 10 00 | UNIT-OWNERS COV A - SPECIAL COVERAGE | PREMIUM \$ | 14.00 |
| HO 04 90 | 10 00 | PERS PROP REPLACEMENT COST LOSS STLMNT | PREMIUM \$ | 104.00 |
| HO 04 16 | 10 00 | PREMISES ALARM OR FIRE PROT. SYSTEM | CREDIT \$ | 10.00 |
| | | 2 PERCENT CREDIT | | |
| HO 04 28 | 04 02 | LIMITED FUNGI, ROT OR BACTERIA COV | PREMIUM | NIL |
| | | \$5,000 PROPERTY DAMAGE | \$50,000 LIABILITY | |
| | | | PREMIUM \$ | 4.00 |
| COVERAGE E OR F INCREASE | | | | |
| | | | TOTAL PREMIUM | \$ 660.00 |
| ACCT NO. 60497548 | | FOUR PAY SINGLE BILL | ----- | |

- PLEASE NOTE -

A LOSS SURCHARGE OF 30% APPLIES TO YOUR POLICY

05% MATURE/RETIREEES CREDIT APPLIES - INCLUDED IN BASIC PREMIUM

FORM HW 01 47 06-12 REPLACES CURRENT VERSION

THE FOLLOWING ITEMS ARE ENCLOSED FOR YOUR REVIEW.

| | |
|------------|--|
| CAF-1445-4 | IF YOU NEED SERVICE OR HAVE A PROBLEM |
| CPF-405-0 | ILLINOIS EARTHQUAKE COVERAGE NOTICE |
| CPF-355-0 | PROPERTY INS EXPERIENCE RATING FACTOR |
| PLA-131-0 | NOTICE OF OUR INSURANCE INFORMATION |
| PLA-203-0 | PRODUCER COMPENSATION NOTICE |
| PLA-342-0 | IL NOTICE-CIVIL UNION AND EQUALITY ACT |

THE LIMIT OF LIABILITY FOR SECTION I COVERAGES MAY BE ADJUSTED
ANNUALLY BASED ON THE INFLATION RATE IN YOUR AREA.

"PLEASE CALL US TOLL FREE AT 1-800-624-5578 IF YOU HAVE ANY QUESTIONS OR
CHANGES TO YOUR POLICY OR A COMPLAINT."