

## PRODUCER

Mesirow Insurance Services, Inc.  
321 N. Clark  
Chicago, IL 60654  
Ph:312-595-6200

**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 BELOW.**

## INSURERS AFFORDING COVERAGE

## INSURED

Residences at River East Center Condominium Association  
512 N McClurg Court  
Chicago, IL 60611

INSURER A: Affiliated FM Insurance Company

INSURER B: Hartford Fire Insurance Company

INSURER C: Federal Insurance Company

INSURER D: Travelers Casualty &amp; Surety Company of America

INSURER E: Twin City Fire Insurance Company

## COVERAGES

**THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED 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 ISSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.**

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
B		<b>GENERAL LIABILITY</b>	83UENRZ7590	04/01/2009	04/01/2010	EACH OCCURENCE	\$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$ 300,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 10,000
		<input type="checkbox"/>				PERSONAL & ADV INJURY	\$ 1,000,000
		<input type="checkbox"/>				GENERAL AGGREGATE	\$ 2,000,000
		<input type="checkbox"/>				PRODUCTS - COMP/OP AGG	\$ 2,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC					
E		<b>AUTOMOBILE LIABILITY</b>	83UENRZ2689	04/01/2009	04/01/2010	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
		<input type="checkbox"/> SCHEDULED AUTOS					
		<input checked="" type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		<input checked="" type="checkbox"/> NON-OWNED AUTOS					
		<input type="checkbox"/>					
		<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT	\$
		<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$
		<input type="checkbox"/>				AUTO ONLY: AGG	\$
C		<b>EXCESS/UMBRELLA LIABILITY</b>	93641877	04/01/2009	04/01/2010	EACH OCCURENCE	\$ 25,000,000
		<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$ 25,000,000
		<input type="checkbox"/> DEDUCTIBLE					\$
		<input checked="" type="checkbox"/> RETENTION \$ 10,000					\$
							\$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATU- TORY LIMITS	OTH- ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$
		If yes, describe under SPECIAL PROVISIONS below.				E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$
A		<b>OTHER</b>					
D		Boiler & Machinery	EI862075	04/01/2009	04/01/2010	\$134,137,931 / \$5,000 Ded.	
F		Crime	104405562	04/01/2009	04/01/2010	\$1,000,000 / \$10,000 Ded.	
A		Dirs & Offc's Liab	024763994	03/31/2009	03/31/2010	\$2,000,000 / \$5,000 Retention	
A		Earthquake	EI862075	04/01/2009	04/01/2010	\$150,000,000/\$100,000 Deductible	
A		Flood	EI862075	04/01/2009	04/01/2010	\$100,000,000/\$100,000 Deductible	

## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

Bruce Houman  
512 N McClurg Court  
Chicago, IL 60611  
UNIT #: 5006

## CERTIFICATE HOLDER

## CANCELLATION

CERT ID: 186919

**SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE  
THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO  
MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE  
LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF  
ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.**

## AUTHORIZED REPRESENTATIVE

Loan #:



## **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s)

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

## **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

<b>ADDITIONAL INFORMATION</b>					<b>DATE (MM/DD/YYYY)</b> 11/24/09	
<b>PRODUCER</b>  Mesirow Insurance Services, Inc. 321 N. Clark Chicago, IL 60654  Ph:312-595-6200			INSURER F Illinois National Insurance Company			
			INSURER G			
			INSURER H			
<b>INSURED</b>  Residences at River East Center Condominium Association 512 N McClurg Court Chicago, IL 60611			INSURER I			
			INSURER J			
<b>INSR LTR</b>	<b>TYPE OF INSURANCE</b>	<b>POLICY NUMBER</b>	<b>POLICY EFFECTIVE DATE (MM/DD/YY)</b>	<b>POLICY EXPIRATION DATE (MM/DD/YY)</b>	<b>LIMITS</b>	
A	Property	EI862075	04/01/2009	04/01/2010	\$134,139,931 / \$10,000 Ded. / Replacement Cost / Agreed Amount	

<b>CERTIFICATE HOLDER</b>	<b>Cert ID: 186919</b>