



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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 OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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). If Waiver of Subrogation is applicable, it only applies to the extent allowed by law.

PRODUCER Mesirow Insurance Services, Inc. 353 N. Clark Street Chicago, IL 60654	CONTACT NAME: Certificate Hotline	
	PHONE 312-595-8109	FAX (A/C, No) 312-595-4331
	E-MAIL ADDRESS: condocerts@alliant.com	
	INSURER(S) AFFORDING COVERAGE	
INSURED Park Tower Condominium Association 5415 N. Sheridan Road Chicago, IL 60640	INSURER A: Atain Insurance Company	
	INSURER B: Great American Insurance Comapny	
	INSURER C: Insurance Company of the West	
	INSURER D: Affiliated FM Insurance Company	
	INSURER E: Continental Casualty Company	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 131472 **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YY)	POLICY EXP (MM/DD/YY)	LIMITS		
A	GENERAL LIABILITY			CIPM0000414	03/01/2018	03/01/2019	EACH OCCURRENCE	\$ \$1,000,000	
	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (each occurrence)	\$ \$100,000	
	CLAIMS-MADE	x	OCCUR				MED EXP (Any one person)	\$ \$5,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$ \$1,000,000	
	x	POLICY	PROJECT				LOC	GENERAL AGGREGATE	\$ \$3,000,000
							PRODUCTS - COMP/OP AGG	\$ \$1,000,000	

	AUTOMOBILE LIABILITY								COMBINED SINGLE LIMIT (Each accident)	\$
	ANY AUTO								BODILY INJURY (Per person)	\$
	ALL OWNED AUTOS								BODILY INJURY (Per accident)	\$
	HIRED AUTOS								PROPERTY DAMAGE (Per accident)	\$

B	x	UMBRELLA LIAB	x	OCCUR		UM30120613	03/01/2018	03/01/2019	EACH OCCURRENCE	\$25,000,000
	EXCESS LIAB		CLAIMS-MADE	AGGREGATE					\$25,000,000	
	DED		x	RETENTION \$None						\$

C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			N/A	WIL502591304	03/01/2018	03/01/2019	WC STATUTORY LIMIT	OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH).							Y/N	E.L. EACH ACCIDENT	\$ \$500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below.							N	E.L. DISEASE - EA EMPLOYEE	\$ \$500,000
									E.L. DISEASE - POLICY LIMIT	\$ \$500,000

	Other				EQ563	03/01/2018	03/01/2019	E.L. DISEASE - POLICY LIMIT		\$ \$500,000
	D Boiler & Machinery							E.L. EACH ACCIDENT	\$ \$500,000	
	E Crime							E.L. DISEASE - EA EMPLOYEE	\$ \$500,000	
	E Dirs & Offc's Liab							E.L. DISEASE - POLICY LIMIT	\$ \$500,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Special form, replacement cost - agreed amount, separation of Insureds.

Crime includes property manager as an employee.

Total number of units - 741

CERTIFICATE HOLDER	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 John Harney

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DESCRIPTIONS (Continued from Page 1)							
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
D	Property			EQ563	03/01/2018	03/01/2019	\$160,500,000 / \$10,000 Deductible