

CERTIFICATE OF LIABILITY INSURANCE

OP ID BH

DATE (MMIDDIYYYY)

07/26/11

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.

'MPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to eterms 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).

PRODUCER	CONTACT NAME:	
Coyle Insurance Agency Inc 4921 N Glen Park Place Peoria IL 61614	PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: RIVER-5	
Phone:309-692-5522 Fax:309-692-5099	INSURER(S) AFFORDING COVERAGE	NAIC #
River City Construction, L.L.C River City Construction Co. 1509 N. Main St	INSURER A: Zurich American Insurance Co	27855
	INSURER B: American Guarantee & Liability	
1509 N. Main St Benton IL 62812	INSURERC: Cincinnati Insurance Co	10677
Benton 1L 62812	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

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 POLICY EFF POLICY EXP							
INS LT	TYPE OF INSURANCE	INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	\$
	GENERAL LIABILITY						EACH OCCURRENCE	\$1,000,000
A	X COMMERCIAL GENERAL LIABILITY			GLO 5342283-06	12/31/10	12/31/11	PREMISES (Ea occurrence)	\$ 500,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	\$ 10,000
		х					PERSONAL & ADV INJURY	\$1,000,000
							GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$2,000,000
L	POLICY X PRO-							\$
(AUTOMOBILE LIABILITY X ANY AUTO			CNN E160001			COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
1	ALL OWNED AUTOS	x	CAA 5169081	CAA 5169081	12/31/10	12/31/11	BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
	X HIRED AUTOS		·					PROPERTY DAMAGE (Per accident)
	X NON-OWNED AUTOS							\$
								\$
В	1			AUC5342387-06	12/31/10	12/31/11	EACH OCCURRENCE	\$25,000,000
	EXCESS LIAB CLAIMS-MADE		ĺ				AGGREGATE	\$25,000,000
	DEDUCTIBLE					[\$
	X RETENTION \$ -0-							\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			EWS4891764-01	12/31/10	12/31/11	X WC STATU- TORY LIMITS ER	
1	ANY PROPRIETOR/PARTNER/EXECUTIVE	1/A	Ī				E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)	ĺ				Į	E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000
С	Excess Umbrella		ĺ	EXS0005524	12/31/10	12/31/11	Each Occ	\$5,000,000
							Aggregate	\$5,000,000

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

RE: Union County Courthouse

CERTIFICAT	E HOLDER	
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CANCELLATION

UNION12

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

Nick G Yates

The County of Union, Illinois 309 West Market Street Jonesboro IL 62952

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Policy Number: GLO 5342283 -06

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSES OR CONTRACTORS – AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

- A. Section II Who Is An Insured is amended to include as an additional insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - 1. Your acts or omissions; or
 - The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured.

A person's or organization's status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

- "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
 - a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
 - b. Supervisory, inspection, architectural or engineering activities.
- 2. "Bodily injury" or "property damage" occurring after:
 - a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 - b. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location And Description Of Completed Operations
ANY PERSON OR ORGANIZATION WITH WHOM YOU HAVE AGREED, THROUGH WRITTEN CONTRACT, AGREEMENT OR PERMIT, EXECUTED PRIOR TO THE LOSS, TO PROVIDE ADDITIONAL INSURED COVERAGE FOR COMPLETED OPERATIONS.	ANY LOCATION WHERE YOU HAVE AGREED, THROUGH WRITTEN CONTRACT, AGREEMENT OR PERMIT, EXECUTED PRIOR TO THE LOSS, TO PROVIDE ADDITIONAL INSURED COVERAGE FOR COMPLETED OPERATIONS.

Section II — Who is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED BY CONTRACT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM GARAGE COVERAGE FORM

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Endorsement Effective:	Policy Number:			
12-31-2010	CAA 516 90 81			
Named Insured:				
RIVER CITY CONSTRUCTION LLC, RIME R MASON CONTRACTOR AND RIVER	VER CITY CONSTRUCTION CO, CITY DESIGN GROUP LLC			
Countersigned by:				
(Authorized December 1)				

(Authorized Representative)

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

SECTION II - LIABILITY COVERAGE, A. Coverage, I. Who is an Insured is amended to include as an insured any person or organization with which you have agreed in a valid written contract to provide insurance as is afforded by this policy.

This provision is limited to the scope of the valid written contract.

This provision does not apply unless the valid written contract has been executed prior to the "bodily injury" or "property damage".



4921 N. Glen Park Place, Peoria, IL 61614

309-692-5522 (Phone) 309-692-5099 (Fax)

WHY ARE WE USING THE LATEST ACORD 25 CERTIFICATE OF INSURANCE?

In September 2009, ACORD revised the ACORD 25 Certificate of Insurance form. One of the major changes was the removal of the cancellation notice provision. For the following reasons, we are unable to issue an older edition of this form, modify the current form, or complete a proprietary form you provide:

- ACORD certificate forms must be filed and approved for us in our state. When a new form is approved, prior
 versions can no longer be used. Therefore, it is illegal for us to issue anything other than the current approved
 ACORD form.
- Notice of cancellation is a policy right, not an unregulated service. No insurer shown on this certificate is able to
 provide the cancellation notice you desire by endorsement. For example, the *insured* can cancel immediately, so
 it would be impossible for the insurer to give you the notice you request. State law also grants the insurer the
 right to cancel for reasons such as non-payment with less notice than you require.
- For the reason just cited, if our agency was to issue a certificate that provides the cancellation notice you request, we would do so with the full knowledge that it would be impossible to actually give that amount of notice under certain circumstances. As such, the certificate could be alleged to constitute a misrepresentation of fraud which could subject our agency and staff to serious civil and criminal penalties.
- If a certificate purports to provide a policy right different from that provided by the policy itself, then the certificate effectively purports to be a policy form. Policy forms must be filed and approved by our state department of insurance. Use of non-filed policy forms is illegal and could result in legal sanctions distinct from the assertion that the certificate is fraudulent.
- Under the ACORD Corporation's licensing agreement, the prior editions of superseded forms can be used for one
 year from the time the new forms are introduced. Beginning in September 2010, this is another reason we cannot
 use an older edition of the ACORD 25. Doing so would violate ACORD's licensing agreement and, as a
 copyrighted document, federal copyright law.
- Likewise, we are unable to modify the new certificate to add a notice of cancellation. ACORD forms are
 designed to be completed, not altered. ACORD's Forms instruction Guide says that a certificate should not be
 used "To waive rights....To quote wording from a contract...To quote any wording which amends a policy unless
 the policy itself has been amended." Also, since our state requires ACORD forms to be filed, any alteration to a
 filed form would require its refilling. In addition, our insurance company contracts only allow us to issue
 unaltered ACORD forms.
- We are often asked to issue proprietary certificates provided by the certificate requestor. Again, our insurance company contracts only allow us to issue unaltered ACORD forms. In addition, our state requires the filing of all certificates of insurance and has very specific regulatory guidelines on certificate language. Many proprietary certificates include broad, vague or ambiguous language that may or may not be in compliance with state laws, regulations and insurance department directives. Therefore, we cannot issue any proprietary certificates that have not been reviewed by our state insurance department.