



STATE FARM FIRE AND CASUALTY COMPANY
 A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

2702 Ireland Grove Road
 Bloomington, IL 61709-0001

Add Insured-Section II Only

000246 3123
 ILLINOIS COMMERCE COMMISSION
 527 E CAPITOL AVE
 SPRINGFIELD IL 62701-1813

M-01-9E72-FB66 F E

DECLARATIONS AMENDED MAY 13 2022

CP 462

Policy Number	93-LM-C511-8	
Policy Period	Effective Date	Expiration Date
1 Year	MAY 2 2022	MAY 2 2023
The policy period begins and ends at 12:01 am standard time at the premises location.		

Named Insured
 DREW GREEN HEATING & COOLING
 LLC



ORIGINAL

Artisan And Service Contractor Policy

Automatic Renewal - If the **policy period** is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Entity: Limited Liability Company

Reason for Declarations: Your policy is amended MAY 13 2022
 ADDITIONAL INSURED ADDED
 PREMIUM ADJUSTMENT
 FORM CMP-4536 ADDED

RECEIVED
 JUN 13 2022

ILLINOIS COMMERCE COMMISSION
 CHIEF CLERK'S OFFICE

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

Endorsement Premium: None

Audit Period: Annual

Discounts Applied:
 Renewal Year
 Years in Business
 Claim Record

Prepared
 MAY 26 2022
 CMP-4000

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ST-0105-0000

DECLARATIONS (CONTINUED)

Artisan And Service Contractor Policy for ILLINOIS COMMERCE COMMISSION
Policy Number 93-LM-C511-8

SECTION I - PROPERTY SCHEDULE

Location Number	Location of Described Premises	Limit of Insurance* Coverage A - Buildings	Limit of Insurance* Coverage B - Business Personal Property	Seasonal Increase-Business Personal Property
001	1975 N LAKE TER GLENVIEW IL 60026-1334	No Coverage	\$ 2,000	25%

* As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage.

SECTION I - INFLATION COVERAGE INDEX(ES)

Cov A - Inflation Coverage Index: N/A
 Cov B - Consumer Price Index: 278.8

SECTION I - DEDUCTIBLES

Basic Deductible \$500

Special Deductibles:

Equipment Breakdown \$500

Other deductibles may apply - refer to policy.

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DECLARATIONS (CONTINUED)

Artisan And Service Contractor Policy for ILLINOIS COMMERCE COMMISSION
Policy Number 93-LM-C511-8



SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH DESCRIBED PREMISES

The coverages and corresponding limits shown below apply separately to each described premises shown in these Declarations, unless indicated by "See Schedule." If a coverage does not have a corresponding limit shown below, but has "Included" indicated, please refer to that policy provision for an explanation of that coverage.

ST-0205-0000

COVERAGE	LIMIT OF INSURANCE
Accounts Receivable On Premises	\$10,000
Off Premises	\$5,000
Arson Reward	\$5,000
Collapse	Included
Damage To Non-Owned Buildings From Theft, Burglary Or Robbery	Coverage B Limit
Debris Removal	25% of covered loss
Equipment Breakdown	Included
Fire Department Service Charge	\$2,500
Fire Extinguisher Systems Recharge Expense	\$5,000
Forgery Or Alteration	\$10,000
Glass Expenses	Included
Increased Cost Of Construction And Demolition Costs (applies only when buildings are insured on a replacement cost basis)	10%
Money Orders And Counterfeit Money	\$1,000
Newly Acquired Business Personal Property (applies only if this policy provides Coverage B - Business Personal Property)	\$100,000
Newly Acquired Or Constructed Buildings (applies only if this policy provides Coverage A - Buildings)	\$250,000
Ordinance Or Law - Equipment Coverage	Included
Outdoor Property	\$5,000

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DECLARATIONS (CONTINUED)

Artisan And Service Contractor Policy for ILLINOIS COMMERCE COMMISSION
Policy Number 93-LM-C511-8

Personal Effects (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500
Personal Property Off Premises	\$15,000
Pollutant Clean Up And Removal	\$10,000
Preservation Of Property	30 Days
Property Of Others (applies only to those premises provided Coverage B - Business Personal Property)	\$2,500
Signs	\$2,500
Valuable Papers And Records	
On Premises	\$10,000
Off Premises	\$5,000
Water Damage, Other Liquids, Powder Or Molten Material Damage	Included

SECTION II - DEDUCTIBLES

Business Liability - Property Damage \$500
Other deductibles may apply - refer to policy.

SECTION II - LIABILITY

COVERAGE	LIMIT OF INSURANCE
Coverage L - Business Liability	\$1,000,000
Coverage M - Medical Expenses (Any One Person)	\$5,000
Damage To Premises Rented To You	\$100,000
AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	\$2,000,000

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MAY 26 2022
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DECLARATIONS (CONTINUED)

Artisan And Service Contractor Policy for ILLINOIS COMMERCE COMMISSION
Policy Number 93-LM-C511-8

General Aggregate

\$2,000,000



Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Coverage Form and any attached endorsements.

ST-0305-0000

Your policy consists of these Declarations, the BUSINESSOWNERS COVERAGE FORM shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

FORMS AND ENDORSEMENTS

- CMP-4100 Businessowners Coverage Form
- CMP-4536 *Addl Insd Owners Lessee Sched
- CMP-4600 Artisan and Service Contractor
- FE-6999.3 Terrorism Insurance Cov Notice
- CMP-4213.1 Amendatory Endorsement
- FE-8790 Civil Union Endorsement
- FE-3650 Actual Cash Value Endorsement
- CMP-4561.3 Policy Endorsement
- CMP-4785.1 Addl Ins Owners Lessee Blkt
- CMP-4787 Waiver of Trans Rgt of Recov
- FD-6007 Inland Marine Attach Dec
- * New Form Attached

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DECLARATIONS (CONTINUED)

Artisan And Service Contractor Policy for ILLINOIS COMMERCE COMMISSION
Policy Number 93-LM-C511-8

This policy is issued by the State Farm Fire and Casualty Company.

Participating Policy

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

Lynne M. Youell
Secretary

Michael J. Tyson
President

For information or assistance with any insurance problem, be sure to contact your State Farm agent first. Your good neighbor agent will be happy to help you.

Section 143c of the Illinois Insurance Code requires notification of the following addresses:

**State Farm Insurance Companies
Illinois Regional Office
2702 Ireland Grove Road
Bloomington, Illinois 61709-0001
1-800-424-1162 (within Illinois)
Office hours: 8:00 a.m. to 4:00 p.m., Monday through Friday**

- or -

**Illinois Department of Insurance
Consumer Division
Springfield, Illinois 62767**

This message is provided by State Farm in compliance with Illinois law.

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STATE FARM FIRE AND CASUALTY COMPANY
A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

2702 Ireland Grove Road
Bloomington, IL 61709-0001

Named Insured

M-01-9E72-FB66 F E

DREW GREEN HEATING & COOLING
LLC

INLAND MARINE ATTACHING DECLARATIONS

Policy Number	93-LM-C511-8	
Policy Period	Effective Date	Expiration Date
1 Year	MAY 2 2022	MAY 2 2023
The policy period begins and ends at 12:01 am standard time at the premises location.		



ST-0405-0000

ATTACHING INLAND MARINE

Automatic Renewal - If the **policy period** is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Annual Policy Premium Included

The above Premium Amount is included in the Policy Premium shown on the Declarations.

Your policy consists of these Declarations, the INLAND MARINE CONDITIONS shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

Forms, Options, and Endorsements

- FE-8782 Inland Marine Conditions
- FE-8743.1 Inland Marine Computer Prop
- FE-8756.1 Installation Endorsement
- FE-8760 Mobile Equipment Form

See Reverse for Schedule Page with Limits

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MAY 26 2022
FD-6007

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ATTACHING INLAND MARINE SCHEDULE PAGE

ATTACHING INLAND MARINE

ENDORSEMENT NUMBER	COVERAGE	LIMIT OF INSURANCE	DEDUCTIBLE AMOUNT	ANNUAL PREMIUM
FE-8743.1	Inland Marine Computer Prop	\$ 25,000	\$ 500	Included
FE-8760	Mobile Equipment Form	\$ 10,000	\$ 500	Included
FE-8756.1	Installation Endorsement	\$ 5,000	\$ 500	Included
	Property in Transit	\$ 5,000		
	Number of Job-Sites: 1			

 OTHER LIMITS AND EXCLUSIONS MAY APPLY - REFER TO YOUR POLICY

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FD-6007

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**CMP-4536 ADDITIONAL INSURED — OWNERS, LESSEES, OR CONTRACTORS
(Scheduled)**



This endorsement modifies insurance provided under the following:
BUSINESSOWNERS COVERAGE FORM

SCHEDULE

Policy Number: 93-LM-C511-8

Named Insured:

DREW GREEN HEATING & COOLING

Name And Address Of Additional Insured Person Or Organization:

**ILLINOIS COMMERCE COMMISSION
527 E CAPITOL AVE
SPRINGFIELD IL 62701-1813**

1. **SECTION II — WHO IS AN INSURED** of **SECTION II — LIABILITY** is amended to include, as an additional insured, any person or organization shown in the Schedule, but only with respect to liability for "bodily injury", "property damage", or "personal and advertising injury" caused, in whole or in part, by:
 - a. **Ongoing Operations**
 - (1) Your acts or omissions; or
 - (2) The acts or omissions of those acting on your behalf;
 in the performance of your ongoing operations for that additional insured; or
 - b. **Products-Completed Operations**
 "Your work" performed for that additional insured and included in the "products-completed operations hazard",
2. Any insurance provided to the additional insured shall only apply with respect to a claim made or a "suit" brought for damages for which you are provided coverage.
3. **Primary Insurance.** The insurance afforded the additional insured shall be primary insurance. Any insurance carried by the additional insured shall be noncontributory with respect to coverage provided by you.

All other policy provisions apply.

CMP-4536

ST-0505-0000