

CITY OF METHUEN  
METHUEN HISTORIC DISTRICT COMMISSION

SEARLES BUILDING, SUITE 217  
41 PLEASANT STREET  
METHUEN, MA 01844  
(978) 983-8560 / Fax (978) 983-8976

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**APPLICATION FOR CERTIFICATE**

Please refer to the official Historic District Commission meeting schedule for meeting dates (typically held the fourth Thursday of every month) and their associated submission deadlines.

Please submit the following, to the Department of Economic and Community Development, 41 Pleasant Street, Suite 217 by the appropriate submission deadline:

- A **\$25.00 application fee** in the form of a check payable to "City of Methuen"
- **One original and ten (10) copies—ELEVEN (11) TOTAL** of:
  - The completed application
  - Secured to each copy of the application: Photographs, material and color samples, manufacturer's illustrations, plans and elevations, shop drawings, site or plot plan, and any other applicable exhibits needed to best inform Commissioners of your proposed actions. **Sign applications** must include dimensions, accurate color samples (paint chips), materials, location, method of display, an image of the proposed sign at an appropriate scale in its proposed location, and an image of any existing signs. Note whether the sign is new or replaces an existing sign.

**Applications will not be accepted if incomplete, missing copies, or with unpaid fees.**

- If your application requires a public hearing (please inquire at the Department of Economic and Community Development), your application must also include:
  - A certified Historic District Commission abutter's list, obtained through Customer Service in Suite 119 or directly from the Assessor's office in Suite 103 (\$35.00 to City of Methuen).
  - Stamped envelopes, pre addressed to each of the abutters and the applicant. If the City of Methuen, 41 Pleasant Street is listed as an abutter, no stamp is required on the addressed envelope.

Applicants, or their representatives, are expected to be present at the meeting during which their application is discussed. Otherwise, the application is subject to removal from the agenda. Application decisions may require more than one meeting.

If any change in use of occupancy or location, or increase in square footage, height, or enclosed space (including garages) is proposed, certification that a ZONING VARIANCE has been issued by the Methuen Zoning Board of Appeals is required. The Commission will NOT hold a hearing on the Application before that certification is issued.

Name of Applicant/Contact: St. Basil Salvatorian Center / Rosemary Lutz  
978-578-0092 - *executive Secretary*  
Site Location of Application: 30 EAST ST, METHUEN, 01844  
Business Name (or N/A): ST. Basil Salvatorian Center - Main Building  
Applicant Mailing Address: 30 EAST ST.  
City, State, Zip: METHUEN, MA 01844  
Telephone/Fax #'s: 978-578-0092 / 978-683-2959  
E-mail: Center @ saintbasils.org

Check type of Certificate applying for:

\_\_\_\_\_ **CERTIFICATE OF APPROPRIATENESS** for work described and exhibits filed.

\_\_\_\_\_ **CERTIFICATE OF NON-APPLICABILITY** for the following reason(s):

- \_\_\_\_\_ Not visible from public street, way, place or body of water
- \_\_\_\_\_ Reconstruction similar to original following fire or other disaster
- ☒ Maintenance, repair, or replacement, using same design, materials, colors
- \_\_\_\_\_ No architectural features involved
- \_\_\_\_\_ Proposed work complies with guidelines
- \_\_\_\_\_ Other

\_\_\_\_\_ **CERTIFICATE OF HARDSHIP**, financial or otherwise described herein and not a substantial derogation from intent and purposes of law.

**DESCRIPTION OF PROPOSED WORK.** Proposed project and current site conditions:

- Remove existing wood shakes
- Remove and replace any rotted wood associated with Soffit and Fascia areas.
- Install house wrap as an air and water barrier (tape all seams)
- Install 3/8 Fan-Fold Insulation underlayment on all exterior walls
- Install Premium Vinyl corner posts
- Custom clad all exterior Door and Window frames with G8 aluminum cladding
- Customer clad all Fascia and soffit areas with vinyl and G8 aluminum cladding
- Install Window World Premium vinyl siding to include all accessories
- Install New 2 x 3 Downspouts
- Install New 5K trough Seamless Gutters
- Clean up all work-related debris and remove from job site (On Site rubbish container)

Proposed Start Date: MAY/JUNE Proposed Completion Date: 2 weeks from <sup>Start</sup> date

Name of Contractor: Manuel Vascancelos - Window World of Boston

Contact Person: Manuel Vascancelos

Address: 235 Neck Rd.

City, State, Zip: Haverhill, MA 01835

License #: Manuel Vascancelos - CS-090758 / Window World of Boston  
HIC # 197574

Telephone/Fax #'s: 978-394-6726 1-781-932-4805

E-mail: mvascanelos@wbkboston.com  
e.reabody@wbkboston.com

Name of Architect: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Mass. Reg. #: \_\_\_\_\_  
Telephone/Fax #'s: \_\_\_\_\_ / \_\_\_\_\_  
E-mail: \_\_\_\_\_

**DOCUMENTATION ATTACHED:**

- ☒ Photographs
- ☒ Materials and/or Color Samples
- ☒ Manufacturer's Illustration
- ☐ Plans and Elevations
- ☐ Shop Drawing(s)
- ☐ Site or Plot Plan
- ☒ Abutters List
- ☒ Stamped envelopes, pre-addressed to abutters
- ☒ Other

**Failure to submit the appropriate materials, substantial information, and/or application fee will result in rejection of this application as incomplete.**

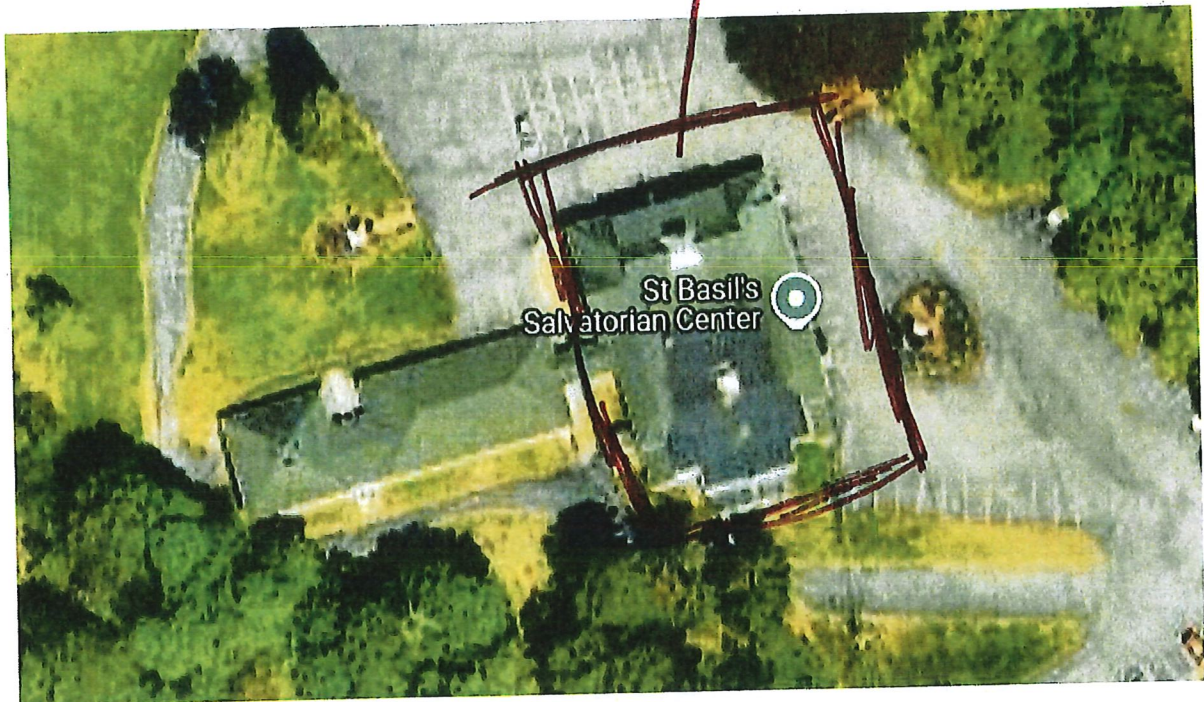
**CERTIFICATION:**

The applicant hereby certifies that this application is complete and accurate, to the best of his/her knowledge, and that no material misrepresentation is made herein.

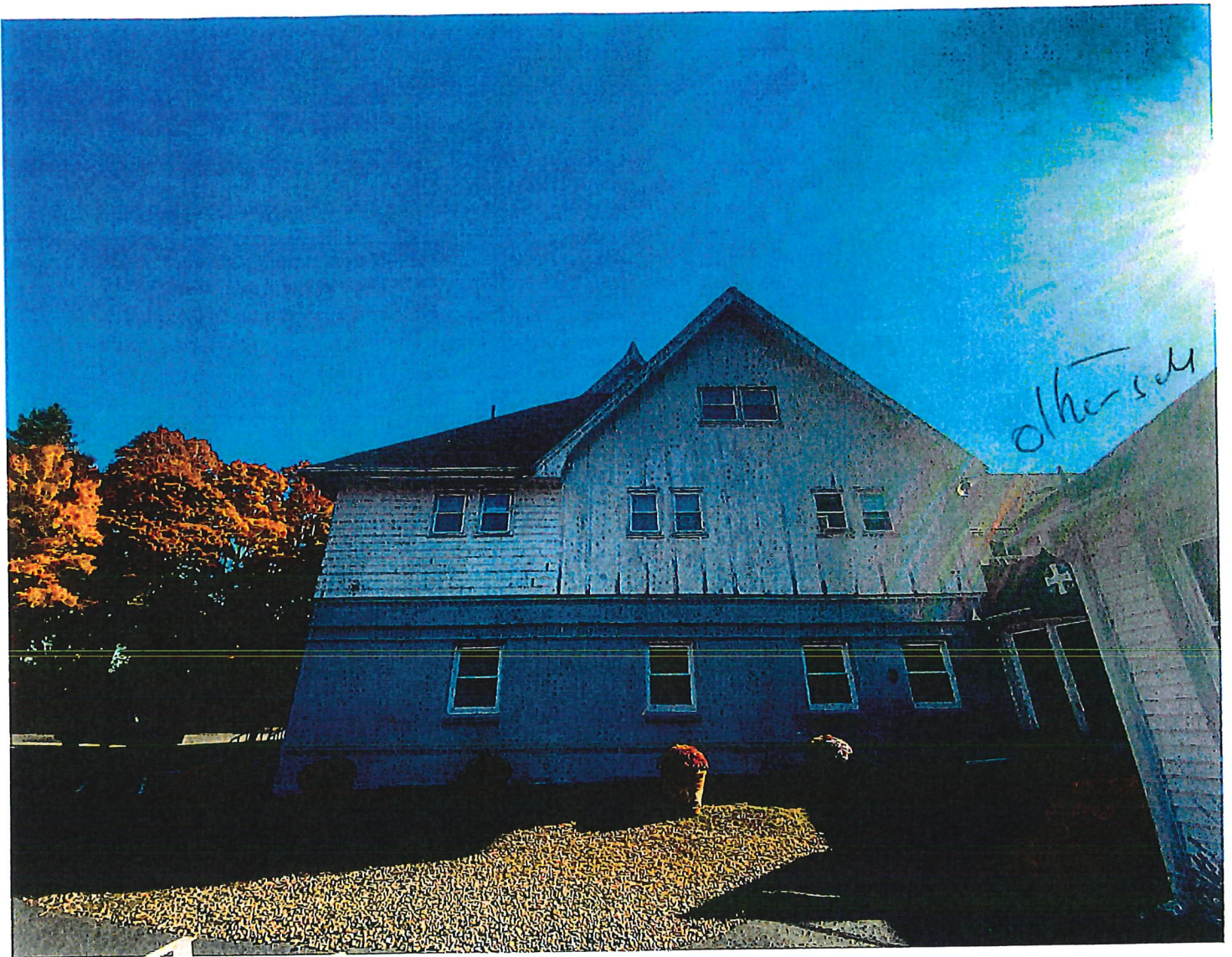
Applicant(s): J.P. Martin & Harte 4/10/25  
Signature(s) Date  
Contractor: Amy Meadows 4/10/25  
Signature Date

St. Basil's Salvatorian Center

area of work











$$\begin{array}{r} 12^{\circ} \\ 8^{\circ} \\ \hline 20 \end{array}$$





$$\begin{array}{r} 110 \\ 60 \\ \hline 170 \end{array}$$

50<sup>D</sup>



# WHY VINYL SIDING?



Vinyl siding is the number one cladding choice in America. In fact, more than twice as many homeowners side with vinyl over stucco, fiber cement or wood<sup>†</sup>.

## **Beautiful Style.**

When you choose vinyl siding, you could have the most beautiful home on the block. Our diverse variety of profiles, colors, textures, and accessories allow you to create the completely customized exterior you've always envisioned.

## **Low Maintenance.**

Unlike wood, stucco, or fiber cement, vinyl siding never needs paint. An occasional cleaning with soap and water is all it takes to keep it looking great – a feature today's strapped-for-time homeowners really appreciate.

## **Highly Durable.**

Vinyl siding is engineered to last. The quality of vinyl siding is tested and certified to withstand harsh weather conditions. For added peace of mind, our products are backed by a Limited Lifetime Warranty\*.

## **Affordable Installation.**

Vinyl siding has the lowest total installed cost of any exterior cladding. It goes up faster and doesn't need paint. No wonder more builders and homeowners prefer it.

## **No Added Cost.**

Vinyl siding has a great return on investment. With no painting or repairs to worry about, it doesn't incur added costs a few years after installation.

## **More Sustainable.**

Vinyl siding can help you earn points toward green building certification. It generates less waste during installation (any vinyl scrap can be recycled) than other cladding options, requires fewer resources to maintain (soap and water), and lasts a lifetime.



# 4000-MS

## VINYL SIDING

### Quality You Can Count On.

With Window World 4000-MS Vinyl Siding, you can feel confident knowing your investment is secure. The result of careful engineering and exceptional design, this panel has a superior thickness of .046", a 3/4" panel projection, and much more. In a nutshell, Window World 4000-MS represents a level of excellence that comes from a commitment to innovative solutions and best-in-class performance.

### Designed for Performance.

These panels stay straight and true because of reinforcement in three critical areas. The double-thick nail hem features a projected stop and provides a stronger anchoring surface so that siding stays firmly in place, even in extreme-force winds. Panels also stay put with a Patented T-3 LOK\* - a uniquely designed lock that tightens under pressure. Combine these features with the enhanced full 3/4" panel projection and you have a premium product built to last.

### Beautiful Choices.

Not only do these panels perform, they come in 35 beautiful colors and longer lengths. For a cleaner, straighter look, choose from Double 4" Traditional and Double 4-1/2" Dutch Lap available in 16' 8" and 25' 6" lengths. These longer panels are ideal for larger homes and light commercial applications. Plus, our Duranyl 5000\* Protection System resists fading and weathering to keep panels looking beautiful.

### Peace of Mind.

Backed by a Limited Lifetime Warranty\*, Window World 4000-MS Vinyl Siding offers everything you need to create a quality home exterior for years of carefree enjoyment.

OPTIONS	
Profiles	<ul style="list-style-type: none"> <li>Double 4"</li> <li>Double 5"</li> <li>Double 4-1/2" Dutch Lap</li> </ul>
Texture	Woodgrain
Projection	3/4" Panel Projection
Colors	35 colors with matching accessories

### Colors

Visualizing color has never been easier.  
Visit [WindowWorld.com/design-center](http://WindowWorld.com/design-center)



Not all colors are available in all profiles.

 PREMIUM COLOR





# Window World of Boston Offices & Showrooms

□ 10 Wall Street, Unit G Burlington, MA 01803 (781) 932-4805  
□ 295 Old Oak Street Pembroke, MA 02359 (781) 826-6281  
□ 1000 Boston Turnpike Shrewsbury, MA 01545 (508) 845-6676

MA HIC Registration Number: 197574  
Federal ID #: 82-4898432

www.WindowWorldofBoston.com

Customer: St. Basil's Salvatorian Center Phone (h) \_\_\_\_\_  
Install Address: 30 East St. Methuen, MA 01844 Phone (w) 978-683-2959  
Bill Address: Same E-mail \_\_\_\_\_

VINYL SIDING PURCHASE ORDER						
<b>AREAS TO BE SIDED</b> Front <input type="checkbox"/> Left <input type="checkbox"/> Back <input type="checkbox"/> Right <input type="checkbox"/> Other _____		<b>PRODUCT</b> WW 2000 <input type="checkbox"/> 4000-EP <input type="checkbox"/> WW 4000 <input checked="" type="checkbox"/> WW6000 <input type="checkbox"/> Other _____ <b>PROFILE</b> Clapboard <input checked="" type="checkbox"/> or Dutchlap <input type="checkbox"/>		<b>COLOR</b> Siding <u>White</u> Outside Corners <u>White</u> <input checked="" type="checkbox"/> STD <input type="checkbox"/> INSULATED <b>INSULATION</b> <input checked="" type="checkbox"/> 3/8" <input type="checkbox"/> FULLBACK <b>HOUSE WRAP</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
<b>SOFFIT, FASCIA, FRIEZE BOARD &amp; GUTTERS</b>						
<b>AREAS TO BE COVERED</b> Front Left Back Right Other _____ *Color* _____ Frieze Board1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____ Soffit <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <u>White</u> Fascia <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <u>White</u>				Tuck Fascia Under Gutter <input type="checkbox"/> Yes <input type="checkbox"/> No New Gutters & Down Spouts <input type="checkbox"/> 5K <input type="checkbox"/> 6K <input type="checkbox"/> Yes <input type="checkbox"/> No *COLOR* _____		
1 Cover Frieze Board with: Aluminum Coil <input type="checkbox"/> or Vert.Soffit <input type="checkbox"/> 2 New Gutters and Down Spouts to be installed. In existing locations, unless noted otherwise below.						
Remove Existing Siding Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> if yes Vinyl <input type="checkbox"/> Wood <input type="checkbox"/> Aluminum <input type="checkbox"/> Only where new siding is to be installed. Window World will NOT remove asbestos material.						
If rotted wood is discovered AFTER removing the existing siding, there will be an additional charge of \$6.00 per Sq. Ft. Customer to indicate acceptance by Initialing _____						
<b>CUSTOM WRAP WITH ALUMINUM</b>			<b>REMOVE &amp; REINSTALL</b>			
# of Frames	Qty	*COLOR*	Storm Windows	Qty	Burglar Bars*	Qty
Windows/Doors	<input checked="" type="checkbox"/>	<u>White</u>	Storm Doors	<input checked="" type="checkbox"/>	Existing Shutters	<input checked="" type="checkbox"/>
Garage/Patio Doors	<input type="checkbox"/>		Awnings - Up to 8'	<input type="checkbox"/>	*In certain markets, Burglar Bars can be removed, but not reinstalled.	
Double Garage Door	<input type="checkbox"/>		Awnings - Over 8'	<input type="checkbox"/>		
Build Out Frame	<input type="checkbox"/>					
<b>FUR OVER MASONRY</b>		<b>PORCH CEILING</b>		<b>NEW ACCESSORIES</b>		
Front <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Back <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/>	Beaded Soft <input type="checkbox"/> Color _____ Universal <input type="checkbox"/> Location _____		<b>GABLE VENTS*</b> Qty. _____ *COLOR* _____ Rectangle <input type="checkbox"/>			
<b>SPECIALTY WRAP</b>		Y/N <input checked="" type="checkbox"/> *COLOR* _____		<b>SHUTTERS</b> # OF PAIRS _____ *COLOR* _____ Louvered <input checked="" type="checkbox"/> Raised Panel <input checked="" type="checkbox"/>		
<b>ROTTED WOOD</b> To be replaced in the following locations: _____						
SPECIAL CONSIDERATIONS: <u>Removal of fire escape - no charge</u>						
Siding Drop Location: <u>Drive Way</u>			Customer agrees to the terms of payment as follows:			
Dumpster Location: <u>Drive Way</u>			Total Project Cost \$ _____ 1/3 Initial Payment \$ <u>0</u> 1/3 Progress Payment \$ <u>0</u> Balance Paid to Installer upon Completion \$ _____ Amount Financed \$ _____			
<small>Window World of Boston anticipates starting this work on _____ and being substantially completed in _____ days. Security interest: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Any deposit required in advance of the start of the work SHALL NOT exceed 33 1/3% of the total contract price of the actual cost of any material or equipment of a special order or custom made nature, which must be ordered in advance of the start of the work to assure that the project will proceed on schedule. No final payment shall be demanded until the contract is completed to the satisfaction of both parties. All home improvement contractors and subcontractors shall be registered and that any inquires about a contract or subcontractor relating to a registration should be directed to: Office of Consumer Affairs and Business Regulation, Ten Park Plaza Suite 5170 Boston, MA 02116. Phone: (617) 973-8700 No work shall begin prior to the signing of the contract and transmittal to the owner of a copy of such contract. Window World of Boston under provision of Chapter 142A of the general laws is required to apply for and obtain all construction-related permits. Window World of Boston shall not be deemed responsible for delays in the work described in this agreement caused by regulatory, permit granting agencies, authorities or individuals. Notice: If the PURCHASER(S) obtains his own construction related permits for the work described under this agreement or deals with unregistered contractors, the PURCHASER(S) is hereby advised that in the event of a dispute, judgement and nonpayment, the PURCHASER(S) will not be entitled to make a claim or collection from the guaranty fund established by chapter 142A, M.G.L.</small>						
You the buyer may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction. Notice of cancellation must be in writing postmarked no later than midnight of the following third business day. <b>THIS IS A CUSTOM ORDER NOT FOR RESALE!</b>						
This Window World Franchise is independently owned and operated by L & P Boston Operating, Inc. under license from Window World, Inc.						

Paul J. Pappas 2/19/2025  
Design Consultant: Do not sign if there are any blank spaces. Date

J.P. Martin Hyatt 2/16/25  
Owner: Do not sign if there are any blank spaces. Date  
Ibrahim El Haddad 2/16/25  
Owner: Do not sign if there are any blank spaces. Date





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/04/25

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 have ADDITIONAL INSURED provisions or 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).

<b>PRODUCER</b> M.P. Roberts Insurance Agency Inc. 522 Chickering Rd North Andover, MA 01845	<b>CONTACT NAME:</b> Amy Roberts <b>PHONE (A/C, No, Ext):</b> 978-683-8073 <b>FAX (A/C, No):</b> 978-683-3147 <b>E-MAIL ADDRESS:</b> Amy@mprobertsinsurance.com														
<b>INSURED</b> L & P BOSTON OPERATING, INC DBA Window World of Boston PO BOX 8236 HAVERHILL, MA 01835	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: MERCHANTS INS COMPANY</td><td></td></tr><tr><td>INSURER B: ASSOCIATED EMPLOYERS</td><td></td></tr><tr><td>INSURER C:</td><td></td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: MERCHANTS INS COMPANY		INSURER B: ASSOCIATED EMPLOYERS		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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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 LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS														
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	y		CTR0000118	04/19/25	04/19/26	<table><tr><td>EACH OCCURRENCE</td><td>\$ 2,000,000</td></tr><tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$ 500,000</td></tr><tr><td>MED EXP (Any one person)</td><td>\$ 5,000</td></tr><tr><td>PERSONAL &amp; ADV INJURY</td><td>\$ 2,000,000</td></tr><tr><td>GENERAL AGGREGATE</td><td>\$ 4,000,000</td></tr><tr><td>PRODUCTS - COMP/OP AGG</td><td>\$ 4,000,000</td></tr><tr><td></td><td>\$</td></tr></table>	EACH OCCURRENCE	\$ 2,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000	MED EXP (Any one person)	\$ 5,000	PERSONAL & ADV INJURY	\$ 2,000,000	GENERAL AGGREGATE	\$ 4,000,000	PRODUCTS - COMP/OP AGG	\$ 4,000,000		\$
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GENERAL AGGREGATE	\$ 4,000,000																				
PRODUCTS - COMP/OP AGG	\$ 4,000,000																				
	\$																				
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			MCAI002569	04/05/25	04/05/26	<table><tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$ 1,000,000</td></tr><tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr><tr><td></td><td>\$</td></tr></table>	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$		\$				
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PROPERTY DAMAGE (Per accident)	\$																				
	\$																				
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			AN083990	04/05/25	04/05/26	<table><tr><td>EACH OCCURRENCE</td><td>\$ 5,000,000</td></tr><tr><td>AGGREGATE</td><td>\$ 5,000,000</td></tr><tr><td></td><td>\$</td></tr></table>	EACH OCCURRENCE	\$ 5,000,000	AGGREGATE	\$ 5,000,000		\$								
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	\$																				
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N N	N/A		5018609	04/05/25	04/05/26	<table><tr><td><input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER</td><td></td></tr><tr><td>E.L. EACH ACCIDENT</td><td>\$ 1,000,000</td></tr><tr><td>E.L. DISEASE - EA EMPLOYEE</td><td>\$ 1,000,000</td></tr><tr><td>E.L. DISEASE - POLICY LIMIT</td><td>\$ 1,000,000</td></tr></table>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER		E.L. EACH ACCIDENT	\$ 1,000,000	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000	E.L. DISEASE - POLICY LIMIT	\$ 1,000,000						
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E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000																				
E.L. DISEASE - POLICY LIMIT	\$ 1,000,000																				

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

WINDOW WORLD INC IS LISTED AS ADDITIONAL INSURED

## CERTIFICATE HOLDER

## CANCELLATION

WINDOW WORLD INC  
118 SHAVER ST  
NORTH WILKESBORO, NC 28659

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

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