

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 02/22/2024

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), 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).						
PRODUCER			CONTACT NAME:			
Aon Risk Services Northeast, Morristown NJ Office 44 Whippany Road, Suite 220 Morristown NJ 07960 USA			PHONE (A/C. No. Ext):	(866) 283-7122	FAX (A/C. No.): 800-363-0105	
		-	E-MAIL ADDRESS:			
			_	INSURER(S) AFFORDING COVERAGE		NAIC#
INSURED			INSURER A:	Arch Insurance Company	,	11150
Anywhere Real Estate Inc Anywhere Integrated Services LLC 175 Park Ave. Madison NJ 07940 USA			INSURER B:			
	LLC		INSURER C:			
			INSURER D:			
			INSURER E:			
			INSURER F:			
COVERACES	CEDTIEICATE NUMBED.	570103995202	1	DEVISION N	IIIMDED.	•

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,

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS LIMITS
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE
	CLAIMS-MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)
							MED EXP (Any one person)
Ì							PERSONAL & ADV INJURY
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE
	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG
	OTHER:						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)
	ANY AUTO						BODILY INJURY (Per person)
	OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)
	AUTOS ONLY HIRED AUTOS ONLY ONLY AUTOS NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)
	ONLY NOTES SILL						
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE
	EXCESS LIAB CLAIMS-MADE						AGGREGATE
.	DED RETENTION						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE OTH-
	ANY PROPRIETOR / PARTNER /	N/A					E.L. EACH ACCIDENT
	(Mandatory in NH)	N/A					E.L. DISEASE-EA EMPLOYEE
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT
A	E&O - Miscellaneous Professional-Primary			SPL005271311 Claims Made Policy	12/17/2023	12/17/2024	Prof Liab Occ. Lmt \$10,000,000 Prof Liab Agg. Lmt \$10,000,000 Deductible \$2,500,000
				l			-

Abstractors & Escrow Agents, all branch offices of Secured Land Transfer LLC dba Burnet Title are included as named insureds the above policy. The Schedule B attachment shows all locations.

CERTIFICATE HOLDER	CANCELLATION		
	SHOULD ANY OF		

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

Aon Prish Services Northeast, Inc.

Burnet Title 7550 France Avenue So., Suite 300 Edina MN 55435 USA

AGENCY CUSTOMER ID:

LOC #:



ADDITIONAL REMARKS SCHEDULE

SCHEDULE Page of

AGENCY		NAMED INSURED	
Aon Risk Services, Northeast, Inc.	See Named Insured on Page 1		
POLICY NUMBER			
See Certificate Number			
CARRIER	NAIC CODE		
See Certificate Number		EFFECTIVE DATE: See Page One	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Evidence of Liability Insurance

Schedule B

CORPORATE OFFICE

7550 France Avenue So., Suite 300

Edina, MN 55435

BUFFALO

700 Highway 55 East

Buffalo, MN 55313

Duluth

1732 London Road

Duluth, MN 55812

Superior

3215 Tower Avenue, Suite 104

Superior, WI 54880

EAGAN

1715 Yankee Doodle Road, Suite

110, Eagan, MN 55122

EDEN PRAIRIE

11455 Viking Drive, Suite 310 Eden

Prairie, MN 55344

EDINA

7550 France Avenue So., Suite 300

Edina, MN 55435

HIGHLAND PARK

1991 Ford Parkway

St. Paul, MN 55116

HUDSON

2424 Monetary Boulevard, Suite 216

Hudson, WI 54016

AGENCY CUSTOMER ID:

LOC #:



ADDITIONAL REMARKS SCHEDULE

Page of

AGENCY		NAMED INSURED	
Aon Risk Services, Northeast, Inc.		See Named Insured on Page 1	
POLICY NUMBER			
See Certificate Number			
CARRIER	NAIC CODE		
See Certificate Number		EFFECTIVE DATE: See Page One	

ADDITIONAL DEMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,				
FORM NUMBER:	ACORD 25	FORM TITLE:	Evidence of Liability Insurance	
MINNEAPOLIS LAKES			SHOREVIEW/ARDEN HILLS	

Lake Calhoun Center 3033 Excelsior Blvd., Suite 110 Minneapolis, MN 55416

MINNETONKA

19400 Highway 7 Excelsior, MN 55331

OAKDALE

434 Hale Avenue, Suite 180 Oakdale, MN 55128

ROCHESTER

140 Elton Hills Lane NW, Suite 200 Rochester, MN 55901

SOUTH METRO

17305 Cedar Ave., Suite 100 Lakeville, MN 55044

SHOREVIEW/ARDEN HILLS

3900 Northwoods Drive, Suite 125, Arden Hills, MN 55112

ST. CLOUD

2680 W. St. Germain Street St. Cloud, MN 56301

WAYZATA

235 Lake Street East, Suite 200 Wayzata, MN 55391

WHITE BEAR LAKE

4801 Highway 61 N., Suite 100 White Bear Lake, MN 55110

WOODBURY

1625 Radio Drive, Suite 100 Woodbury, MN 55125

Updated 22/02/2024