



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
05/28/2020

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).

PRODUCER Aon Risk Services Northeast, Inc. Morristown NJ Office 44 Whippany Road, Suite 220 Morristown NJ 07960 USA	CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): 800-363-0105	
	E-MAIL ADDRESS:	
INSURED Realogy Holdings Corp. Realogy Title Group LLC 175 Park Ave. Madison NJ 07940 USA	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Arch Insurance Company	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
		NAIC # 11150
		INSURER F:

COVERAGES **CERTIFICATE NUMBER:** 570081907297 **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. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION						EACH OCCURRENCE AGGREGATE
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> Y / <input type="checkbox"/> N / A PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT
A	E&O-MPL-Primary			SPL005271307 Claims Made Policy SIR applies per policy terms & conditions	12/17/2019	12/17/2020	Prof Liab Occ. Lmt \$10,000,000 Prof Liab Agg. Lmt \$10,000,000 SIR (each claim) \$2,500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Abstractors & Escrow Agents, all branch offices of Secured Land Transfer LLC d/b/a Burnet Title are included as named insureds on the above policy. The Schedule B attachment shows all locations.

CERTIFICATE HOLDER

CANCELLATION

Burnet Title 5151 Edina Industrial Blvd., Suite 500 Edina, MN 55439 USA	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





ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services, Northeast, Inc.		NAMED INSURED See Named Insured on Page 1	
POLICY NUMBER See Certificate Number			
CARRIER See Certificate Number	NAIC CODE	EFFECTIVE DATE: Dec. 17, 2015	

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 310
Edina, MN 55439

EAGAN

1875 Plaza Drive, Suite 100
Eagan, MN 55122

BUFFALO

700 Highway 55 East
Buffalo, MN 55313

EDEN PRAIRIE

11455 Viking Drive, Suite 310
Eden Prairie, MN 55344

EDINA

7550 France Avenue So., Suite 200
Edina, MN 55435

HIGHLAND PARK

1991 Ford Parkway
St. Paul, MN 55116

HUDSON

1301 Coulee Road
Hudson, WI 54016



ADDITIONAL REMARKS SCHEDULE

AGENCY Aon Risk Services, Northeast, Inc.		NAMED INSURED See Named Insured on Page 1
POLICY NUMBER See Certificate Number		EFFECTIVE DATE: Dec. 17, 2015
CARRIER See Certificate Number	NAIC CODE	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

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

MINNEAPOLIS LAKES

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

SARTELL

2105 Troop Drive
 Sartell, MN 56377

MINNETONKA

19400 Highway 7
 Excelsior, MN 55331

SHOREVIEW

100 Village Center Drive
 North Oaks, MN 55127

OAKDALE

434 Hale Avenue, Suite 180
 Oakdale, MN 55128

ST. CLOUD

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

PLYMOUTH

4100 Berkshire Lane
 Plymouth, MN 55446

WAYZATA

201 East Lake Street, Ste 200
 Wayzata, MN 55391

ROCHESTER

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

WHITE BEAR LAKE

4801 Highway 61, Suite 203
 White Bear Lake, MN 55110

SOUTH METRO

17305 Cedar Ave., Suite 110
 Lakeville, MN 55044

WOODBURY

576 Bielenberg Drive, Suite 100
 Woodbury, MN 55125

Updated 5/28/20