



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/9/2016

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 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 Willis of New York, Inc. 200 Liberty Street, 6 th Floor New York NY 10281	CONTACT NAME: W Fleenor		
	PHONE (A/C, No. Ext): 813-490-6843	FAX (A/C, No):	
	E-MAIL ADDRESS: wendy.fleenor@willis.com		
	PRODUCER CUSTOMER ID #:		
	INSURER(S) AFFORDING COVERAGE		
INSURED Heritage Title Company Inc. and its Subsidiaries Corporate Risk Management Department 601 Riverside Avenue, Bldg 5 Jacksonville FL 32204	INSURER A : Houston Casualty Company		NAIC#
	INSURER B : Loyds		42374
	INSURER C :		15792
	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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE	\$
							DAMAGES 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"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						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 DEDUCTIBLE 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		N/A				WC STATUTORY LIMITS	OTHER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
A B	OTHER Errors & Omissions/Cyber Risk Fidelity Bond/Computer Crime Policy			14MG16A13034 W131B9160501	11/15/2016 11/15/2016	11/15/2017 11/15/2017	Limit Per Claim - \$10M / Annual Agg - \$10M Limit Per Claim - \$25M / Annual Agg - \$50M	

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

Evidence of E&O and Crime Insurance for all locations and operations of Heritage Title Company Inc. and its subsidiaries anywhere in the world, including but not limited to the office locations listed in the attached. E&O includes Professional and Technology Liability and Cyber Risk Coverage

CERTIFICATE HOLDER	CANCELLATION
	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

Street Address City, State Zip

4582 South Ulster Street Pkwy #1300 Denver, CO 80237
2675 S Abilene St #200 Aurora, CO 80014
1650 38th Street #100E Boulder, Co 80301
44 Cook Street, Suite 1005 Denver, CO 80206
1150 Kelly Johnson Blvd #140 Colorado Springs, Co 80920
4582 South Ulster Street Pkwy #1300 Denver, CO 80237
300 Stafford Lane Suite 3013 Delta, CO 81416
4582 South Ulster Street Pkwy #1300 Denver, CO 80237
0050 Chambers Ave. Suite I,J,K P.O. Box 1980 Eagle, CO 81631
2510 E. Harmony Road #201 Ft Collins, CO 80528
330 Grand Avenue Grand Junction, CO 81501
7251 W. 20th St. Bldg. L, # 100 Greeley, CO 80634
1745 Shea Center Drive #160 Highlands Ranch, Co 80129
351 Coffman St #215 Longmont, CO 80501
9101 Harlan Street #330 Westminster, CO 80031
10375 Park Meadows Dr. #550 Littleton, Co 80124
3900 S. Wadsworth Blvd #450 Lakewood, CO 80235
685 Market Plaza Unit C-10 Steamboat, CO 80487
5460 Ward Road #230 Arvada, CO 80002
300 Union Blvd. #500 Lakewood, CO 80228
3001 N Taft Ave #100, Loveland, CO 80537
90 South Cascade, Suite 950, Colorado Springs, Colorado 80903
1401 Wynkoop St., Suite 120 , Denver, CO 80202