



# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
05/16/2025

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> Aon Risk Services Northeast, Inc. New Jersey Office 44 Whippany Road, Suite 220 Morristown NJ 07960 USA	<b>CONTACT NAME:</b> <b>PHONE</b> (A/C. No. Ext): (866) 283-7122 <b>FAX</b> (A/C. No.): 800-363-0105 <b>E-MAIL ADDRESS:</b>														
<b>INSURED</b> Anywhere Real Estate Inc Anywhere Integrated Services LLC 175 Park Ave. Madison NJ 07940 USA	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: Arch Insurance Company</td><td>11150</td></tr><tr><td>INSURER B:</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: Arch Insurance Company	11150	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER D:															
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INSURER F:															

**COVERAGES** **CERTIFICATE NUMBER:** 570112576921 **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
	<b>COMMERCIAL GENERAL LIABILITY</b> <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 OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG
	<b>AUTOMOBILE LIABILITY</b> <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)
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
	<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 <input type="checkbox"/> N/A						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT
A	E&O - Miscellaneous Professional-Primary			SPL005271312 Claims-Made SIR applies per policy terms & conditions	12/17/2024	12/17/2025	Prof Liab Aggregate \$5,000,000 Self Insured Retent \$2,500,000 Prof Liab per Polic \$5,000,000

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

Evidence of Insurance for Office Locations on the following pages. Evidence of Insurance for: Over Under Title LLC dba TitleOne dba TitleOne Exchange dba TRG Exchange dba Sun Valley Title.

## CERTIFICATE HOLDER

Anywhere Integrated Services LLC  
1000 Bishop Gate Blvd., Suite 100  
Mt. Laurel NJ 08054 USA

## 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

*Aon Risk Services Northeast, Inc.*

Holder Identifier :

570112576921

Certificate No :



**ADDITIONAL REMARKS SCHEDULE**

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AGENCY Aon Risk Services Northeast, Inc.		NAMED INSURED Anywhere Real Estate Inc	
POLICY NUMBER See Certificate Number: 570112576921			
CARRIER See Certificate Number: 570112576921	NAIC CODE	EFFECTIVE DATE:	

**ADDITIONAL REMARKS****THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,****FORM NUMBER:** ACORD 25 **FORM TITLE:** Certificate of Liability Insurance**TitleOne Office Locations**

TitleOne  
1101 W. River St., Suite 201  
Boise, ID 83702

TitleOne  
868 E. Riverside Drive, Suites 100  
Eagle, ID 83616

TitleOne  
1120 S. Rackham, Suite 150  
Meridian, ID 83642

TitleOne  
5660 E. Franklin Rd., Suite 101  
Nampa, ID 83687

TitleOne  
904 Dearborn St., Suite 100  
Caldwell, ID 83605

TitleOne  
1614 Elk Creek Drive  
Idaho Falls, ID 83404

TitleOne  
2065 W. Riverstone Dr., Suite 300  
Coeur d'Alene, ID 83814

TitleOne  
1411 Falls Ave. East, Suite 1131  
Twin Falls, ID 83301

TitleOne  
211 West 13th St.  
Burley, Idaho 83318

TitleOne  
710 G. Street  
Rupert, Idaho 83350

TitleOne  
237 N. Lincoln  
Jerome, ID 83338

TitleOne  
706 Main St.  
Gooding, ID 83330

Sun valley Title  
271 1st Ave North  
Ketchum, Idaho 83340

TitleOne  
605 N. Fifth Ave.  
Sandpoint Idaho 83864

Sun valley Title  
221 North River Street  
Hailey Idaho 83333



# ADDITIONAL REMARKS SCHEDULE

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POLICY NUMBER See Certificate Number: 570112576921			
CARRIER See Certificate Number: 570112576921	NAIC CODE	EFFECTIVE DATE:	

## ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**

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

TitleOne Office Locations cont.

TitleOne  
560 S. 16th Street, Suite A  
Payette, ID 83661

TitleOne  
606 State Street  
Weiser, ID 83672

TitleOne  
2929 W. Navigator Drive, Suite 100  
Meridian, ID 83642

TitleOne  
166 E. Main Street  
Dayton, WA 99328

TitleOne  
1919 N. Pittsburgh St., Ste A  
Kennewick, WA 99336

TitleOne  
623 6th Street  
Prosser, WA 99350

TitleOne  
5 East Main Street  
Walla Walla, WA 99362

TitleOne  
1230 Idaho Street  
Lewiston, ID 83501

TitleOne  
688 Rigby Lake Drive, Suite #2  
Rigby, Idaho 83442

TitleOne  
395 E Chubbuck Road, Suite 103  
Chubbuck, ID 83202

TitleOne  
3991 Valley Commons Dr.  
Bozeman, MT 59718

TitleOne  
1421 N. Meadowwood Ln., Suite 100  
Liberty Lake, WA 99019

TitleOne  
109 N Main Street  
Cascade, ID 83611

TitleOne  
110 Rattlesnake Blvd  
Mountain Home, ID 83647

TitleOne  
280 S Oregon St.  
Ontario, OR 97914