

**ZURICH AMERICAN INSURANCE COMPANY  
CERTIFICATE OF INSURANCE**

We've issued this certificate of insurance as a matter of information only. It names the real estate licensee who qualifies as a protected person under the below mentioned state's Real Estate Licensee Professional Liability Protection-Claims-Made insuring agreement. It also lists the coverage effective date, coverage expiration date, and the limits of liability that apply to the licensee named in this certificate. This certificate does not grant the holder or licensee named in the certificate any rights. Nor does it amend, extend, or alter the coverage provided by the policy identified below.

LICENSEE:

**MATTHEW ROBERT REDMER  
1632 ORANGE BRANCH TRL  
SAINT JOHNS FL 32259**

The coverage provided under the insuring agreement is written on a claims-made basis read your policy carefully.

<b>LICENSE NUMBER:</b> 20210627 <b>NEBRASKA REAL ESTATE ERRORS &amp; OMISSIONS INSURANCE</b> <b>POLICY NUMBER:</b> EOC 9827597 10 <b>YOUR COVERAGE EFFECTIVE DATE:</b> 01/01/2022 <b>YOUR COVERAGE EXPIRATION DATE:</b> 01/01/2023 <b>YOUR RETROACTIVE DATE:</b> 06/01/2021 <b>CERTIFICATE NUMBER:</b> 12-11241	<b>Program Administrator:</b> Williams Underwriting Group a Division of AssuredPartners NL, LLC 2211 River Road Louisville KY 40206 Telephone: 800-222-4035  <b>Insurance Company:</b> Zurich American Insurance Company 1299 Zurich Way Schaumburg, IL 60196-1056
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<b>Type of Insurance</b>	<b>Limits/Deductibles</b>
<b><u>Coverage A: Real Estate Licensees Professional Liability</u></b> Each per claim limit: Aggregate Limit: Each wrongful act deductible:	\$100,000 \$300,000 \$1,000
<b><u>Coverage B: Lock Box Property Damage Liability</u></b> Each per claim limit: Aggregate Limit: Deductible:	\$100,000 \$300,000 \$0
<b><u>Coverage C: Fair Housing Discrimination Liability</u></b> Each per claim limit: Aggregate Limit: Deductible:	\$50,000 \$50,000 \$1,000
<b><u>Coverage D: Subpoena Assistance Costs</u></b> Each per claim limit: Aggregate Limit: Deductible:	\$2,500 \$2,500 \$0
<b><u>Endorsements that also apply:</u></b>	<b><u>Form Number:</u></b>
Premium (this is not a bill)	\$123.00

ALL PREMIUMS ARE FULLY EARNED ONCE COVERAGE GOES INTO EFFECT. TEN (10) DAYS WRITTEN NOTICE WILL BE GIVEN FOR CANCELLATION DUE TO NON PAYMENT OF PREMIUM

**U-REL-935-B NE (1/17)**



## Important Notice – In Witness Clause

In return for the payment of premium, and subject to the terms of this policy, coverage is provided as stated in this policy.

IN WITNESS WHEREOF, this Company has executed and attested these presents and, where required by law, has caused this policy to be countersigned by its duly Authorized Representative(s).

*Nancy D. Muelles*

President

*James F. Kennedy*

Corporate Secretary

**QUESTIONS ABOUT YOUR INSURANCE?** Your agent or broker is best equipped to provide information about your insurance. Should you require additional information or assistance in resolving a complaint, call or write to the following (please have your policy or claim number ready):

Zurich in North America  
Customer Inquiry Center  
1299 Zurich Way  
Schaumburg, Illinois 60196-1056  
**1-800-382-2150** (Business Hours: 8am - 4pm [CT])  
**Email:** [info.source@zurichna.com](mailto:info.source@zurichna.com)