

OP ID: GTO



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/04/2021

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	vurance Comilece		CONTACT George Tolis					
CA License	surance Services e # 0G9443		PHONE (A/C, No, E)	FAX (A/C, No):				
1100 Virgir	nia Drive, Suite 250 ington, PA 19034		É-MAIL ADDRESS:					
TOIL Wasii	ington, i A 13034			Ε	NAIC #			
			INSURER A					
INSURED	Cypress Title Corpo	ration	INSURER B	1:				
	450 Exchange Irvine, CA 92602		INSURER C	: Great American Insurance Co				
			INSURER D	):				
			INSURER E :					
			INSURER F	is a second of the second of t				
COVEDA	CEC.	CEDITICICATE NUMBER.	DEVICION NUMBER.					

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 EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

	COLC	0001107111000	1101	1101			SUBR	T T T T T T T T T T T T T T T T T T T	POLICY EFF	POLICY EXP			
INSR LTR	SR TR TYPE OF INSURANCE				WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS				
	GENERAL LIABILITY							EACH OCCURRENCE	\$	2,000,000			
Α	Х	COMMERCIAL GE	NER	AL LIA	ABILITY			39SBAUL7313	01/30/2021	01/30/2022	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
		CLAIMS-MAD	DE [	X	OCCUR						MED EXP (Any one person)	\$	10,000
											PERSONAL & ADV INJURY	\$	2,000,000
											GENERAL AGGREGATE	\$	4,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:			ES PER:						PRODUCTS - COMP/OP AGG	\$	4,000,000	
	X	POLICY PR	O- CT		LOC							\$	
	AUTOMOBILE LIABILITY		'						COMBINED SINGLE LIMIT (Ea accident)	\$	2,000,000		
Α	ANY AUTO						39SBAUL7313	01/30/2021	01/30/2022	BODILY INJURY (Per person)	\$		
		ALL OWNED AUTOS		AUT							BODILY INJURY (Per accident)	\$	
	Χ	HIRED AUTOS	X	1ON TUA	N-OWNED TOS						PROPERTY DAMAGE (PER ACCIDENT)	\$	
												\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$				
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$				
		DED RETE	NTIC	ON \$								\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  Y/N			V/N						WC STATU- OTH- TORY LIMITS ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?			N/A					E.L. EACH ACCIDENT	\$			
	(Mandatory in NH)			,,,					E.L. DISEASE - EA EMPLOYEE	\$			
	If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POLICY LIMIT	\$			
С	C Directors &						DOL1345997	03/31/2020	03/31/2021	Per Claim		1,000,000	
	Liablity E&O									Retention		100,000	
l													•

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

Locations:

450 Exchange, Suite 100, Irvine, CA 92602 591 Camino de la Reina, Suite 1105, San Diego, CA 92108

CERTIFICATE HOLDER	CANCELLATION					
Cypress Title Corp 450 Exchange	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Irvine, CA 92602	AUTHORIZED REPRESENTATIVE  ALL Authorized Representative					