

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/09/2025

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.

	SUBROGATION IS WAIVED, subject is certificate does not confer rights t							require an endorsemen	t. A statement on	
PRODUCER						CONTACT Jamie Goldfoos				
Gallagher Affinity Insurance Services, Inc. P.O. Box 29502 #69121					PHONE (A/C, No, Ext): 415-479-9988 (A/C, No): 415-479-9966					
					(A/C, No, Ext): 410 470 0000 (A/C, No): 410 470 0000 E-MAIL ADDRESS: jamie_goldfoos@ajg.com					
	s Vegas, NV 89126				ADDRES				NAIC#	
CA Ins Lic 0783129					INSURER A: Palomar Specialty Insurance Company					
Pro Group Corona, Inc.						INSURER B: INSURER C:				
										4160 Temescal Canyon Road, Suite 500 Corona, CA 92883
INSURER F:										
				E NUMBER:	REVISION NUMBER: VE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD.					
C	IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	QUIF PERT POLI ADDL	REME AIN, CIES. SUBR	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF ANY ED BY BEEN R	CONTRACT	OR OTHER I S DESCRIBEI PAID CLAIMS.	DOCUMENT WITH RESPE D HEREIN IS SUBJECT TO	CT TO WHICH THIS O ALL THE TERMS,	
LTR	COMMERCIAL GENERAL LIABILITY	INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)			
								DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	
	CLAIMS-MADE OCCUR								\$	
								MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	
	OTHER:							COMBINED SINGLE LIMIT	\$	
	AUTOMOBILE LIABILITY							(Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (Per accident)	\$	
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
									\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$								\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	IN / A						E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
Α	Errors and Omissions Insurance	Υ		PXEOPL01004-00		01/05/2025	01/05/2026	Each Claim	\$2,000,000	
								Annual Aggregate	\$2,000,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	ACORD	0 101, Additional Remarks Schedu	ile, may be	attached if more	e space is require	ed)		
CE	RTIFICATE HOLDER				CANC	ELLATION	***************************************			
	Additional Insured:									
Keller Williams Realty, Inc. and it's designated affiliates,						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
Austin, TX 78746						AUTHORIZED REPRESENTATIVE				

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Jamie Goldfoos