



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/24/2025

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).

PRODUCER The Andrew Agency Inc 4551 Cox Road Suite 100 Glen Allen VA 23060	CONTACT NAME: Chris Biamonte PHONE (A/C, No, Ext): (804) 320-2886 E-MAIL ADDRESS: chris@theandrewagency.com FAX (A/C, No): (804) 320-5750																					
INSURED Close It Title Services, Inc. DBA Federal Title & Escrow Company 5481 Wisconsin Avenue, Suite D Chevy Chase MD 20815	<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: Sentinel Insurance Company LTD</td><td></td><td>11000</td></tr><tr><td>INSURER B: Twin City Fire Insurance Company</td><td></td><td>29459</td></tr><tr><td>INSURER C: Property & Casualty Insurance Company of Hartford</td><td></td><td>34690</td></tr><tr><td>INSURER D: Trumbull Insurance Company</td><td></td><td>27120</td></tr><tr><td>INSURER E: RLI Insurance Company</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A: Sentinel Insurance Company LTD		11000	INSURER B: Twin City Fire Insurance Company		29459	INSURER C: Property & Casualty Insurance Company of Hartford		34690	INSURER D: Trumbull Insurance Company		27120	INSURER E: RLI Insurance Company			INSURER F:		
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COVERAGES**CERTIFICATE NUMBER:** CL2592408824**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:			14SBAPI7931	09/30/2025	09/30/2026	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY			14SBAPI7931	09/30/2025	09/30/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	☒ UMBRELLA LIAB ☒ EXCESS LIAB DED ☒ RETENTION \$ 10,000			14SBAPI7931	09/30/2025	09/30/2026	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
B-D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N ☒ N	N / A	14WECCN7933	09/30/2025	09/30/2026	☒ PER STATUTE ☐ OTH-ER \$500,000 E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
E	Professional Liability "Claims Made" Form			RTP0048572	10/08/2025	10/08/2026	Each Claim limit \$2,000,000 Annual Aggregate limit \$2,000,000

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

BUSINESS LIABILITY POLICY INCLUDES FORM #SS00080405 WHICH INCLUDES ADDITIONAL INSURED, PRIMARY & NON-CONTRIBUTORY & WAIVER OF SUBROGATION STATUS WHEN REQUIRED BY A WRITTEN CONTRACT.

Subject to all policy forms, terms, and conditions.

CERTIFICATE HOLDER**CANCELLATION**

Close it! Title Services, Inc. DBA Federal Title & Escrow 5481 Wisconsin Avenue Suite D Chevy Chase MD 20815	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 <i>Ryan M. Andrew</i>
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