

# LLOYD'S

Declarations Page  
Real Estate Appraisers E&O Program

CERTIFICATE NO. 13REALPC-00405

BINDING AUTHORITY: B0702BB013810C

Item 1a. **Insured Member:** Victor E. Brown dba Capital Market Appraisal  
**Mailing Address:** 1125 11th Street NW 402, Washington, DC 20001

Item 2. **PERIOD OF INSURANCE:** **FROM:** 05/16/2014 **TO:** 05/16/2015  
12:01AM STANDARD TIME AT THE ADDRESS SHOWN IN NUMBER 1 ABOVE.

Item 3. **LIMIT OF LIABILITY:** a) \$ 1,000,000 **Each Claim, Includes Claims Expenses**  
b) \$ 1,000,000 **Annual Aggregate, Includes Claims Expenses**

Item 4. **DEDUCTIBLE:** \$ 500 **Each Claim deductible - Includes Claims Expenses**

Item 5. **PREMIUM U. S.:** \$ 390.00 Gross Premium  
\$ 7.80 DC Surplus Lines Tax  
\$ Processing Fee  
\$ 447.80 Total Premium

Item 6. **RETROACTIVE DATE:** 05/16/2014  
Item 7. **NOTICE OF CLAIM TO:** Premier Claims Management, LLC  
2020B North Tustin Avenue  
Santa Anna, CA 92705  
888-683-2266 (p)  
866-885-4047 (f)  
[www.premierclaimsllc.com](http://www.premierclaimsllc.com)

*In the event of a claim under the Master Policy or any circumstances likely to give rise to a claim, the Insured shall have the duty to immediately give notice to the entity specified above.*

Item 8. **NOTICE OF ELECTION:** 5 Star Professional Programs  
1230 East Diehl Road, Suite 350 Naperville, IL 60563  
Tel: 866-879-6565 Fax: 866-720-5003

**SPECIAL CONDITIONS:** as per attached form list