GENERAL STAR NATIONAL INSURANCE COMPANY
Financial Centre
P.O. Box 10360
Stamford, Connecticut 06904-2360

REAL ESTATE APPRAISERS ERRORS & OMISSIONS INSURANCE POLICY

DECLARATIONS PAGE

This is a claims made and reported policy. Please read this policy and all endorsements and attachments carefully.

Policy Number: **NJA994684E** Renewal of Number: **NJA994684D**

1. **NAMED INSURED:** **Brian D. Schaver**
   STREET ADDRESS: **1022 1st Center Avenue Suite B**
   Brodhead, WI 53520

2. **POLICY PERIOD:** Inception Date: **09/06/2010** Expiration Date: **09/06/2011**

   Effective 12:01 a.m. Standard Time at the address of the Named Insured.

3. **LIMIT OF LIABILITY:**
   Each Claim: **$ 500,000**
   Aggregate: **$1,000,000**
   Claim Expenses have a separate Limit of Liability:
   Each Claim: **$ 500,000**
   Aggregate: **$1,000,000**

4. **DEDUCTIBLE**: Each Claim: $500.00 Aggregate: $1,000.00

5. **RETROACTIVE DATE:** **09/06/2005**

   If a date is indicated, this policy will not provide coverage for any **Claim** arising out of any act, error, omission or personal injury which occurred before such date.

6. **ANNUAL PREMIUM:** **$ 573.00**

7. **ENDORSEMENTS:**
   This policy is made and accepted subject to the printed policy form together with the following form(s) or endorsement(s).
   GSN-07-AP-122(07/2007) GSN-07-AP-851WI (10/2007)
   GSN-07-AP-375 (10/2007) GSN-07-AP-201 (06/2007)

8. **MANAGING AGENT**
   Herbert H. Landy Insurance Agency, Inc.
   75 Second Avenue, Suite 410

   Needham, Massachusetts 02494-2876

Authorized Representative

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Date: 08/16/2010 **SLA#:**