



GENERAL STAR NATIONAL INSURANCE COMPANY
P.O. Box 10354
Stamford, Connecticut 06904

REAL ESTATE ERRORS & OMISSIONS LIABILITY INSURANCE POLICY

DECLARATIONS PAGE

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

Policy Number: **NJA802901B**

Renewal of Number: **NJA802901A**

1. NAMED INSURED: **Ralph G Hudgins, Inc**
MAILING ADDRESS: **660 Gordon Combs Rd**
Marietta, GA 30064

2. POLICY PERIOD: Inception Date: **03/01/2011** Expiration Date: **03/01/2012**
 Effective 12:01 a.m. Standard Time at the mailing address of the Named Insured.

3. LIMIT OF LIABILITY:
 Each Claim: **\$ 1,000,000**
 Aggregate: **\$ 1,000,000**
 Lock Box Liability: **See Above**

4. CLAIM EXPENSES:
 b. Have a separate limit of liability.

5. STATUS OF INSURED: **Corporation**

6. DEDUCTIBLE:
 Each Claim: **\$ 1,000**
 b. The deductible amount specified above applies to both Damages and Claims Expenses.

7. PRIOR ACTS DATE: **03/01/2005**
 If a date is indicated, this insurance will not apply to any regular act, error, omission or personal injury which occurred before such date.

8. PREMIUM: **\$ 660.00**

9. ENDORSEMENTS:
 This policy is made and accepted such to the printed conditions in this policy together with the provisions, stipulations and agreements contained in the following form(s) or endorsement(s).

- GSN-06-RE-124GA (10/2003) GSN-06-PL-812GA (05/2004)
- 06-PL-392 (07/2004) 06-PL-394A (07/2004) 06-PL-396 (07/2004)
- GSN-07-RE-283 (06/2008) 06-RE-856GA (10/2003) 06-RE-350 (03/2004) GSN-07-PL-375 (02/2006)

10. MANAGING AGENT
 Herbert H. Landy Insurance Agency, Inc.
 75 Second Avenue, Suite 410
 Needham, Massachusetts 02494-2876

 Authorized Representative

Producer Code: 00026230
 Date: 02/08/2011

Class Code: 73127
 SLA#:
 Subline Code: 102

GSN-06-RE-720 (04/2004)