



Policyholder Disclosure Notice Landlords Package Policy Program

Your renewal policy includes an important coverage change. Please review this important notice and retain it with **your** insurance policy.

This disclosure notice is not a contract of insurance. It is intended to provide information on endorsement FL-30 (Ed. 5/92), which is part of this policy. It is recommended that **you** review **your** policy carefully to determine **your** duties, rights and obligations. This information is intended to assist **you** in **your** review of the prior and current policy. If there are any conflicts between this Disclosure Notice and **your** policy, the provisions of the policy shall prevail.

The change in form FL-30 (Ed. 5/92) is the exclusion of loss resulting directly or indirectly from **bodily injury** caused by lead poisoning:

1. resulting from inhalation or ingestion of dust, chips or other residues of lead or lead based materials adorning the interior or exterior of the covered building(s);
2. resulting from ingestion of leaded leachate from plumbing systems comprising part of the **insured premises**; or
3. resulting from the ingestion of lead or residues of lead from the soil comprising a part of the **insured premises**.

FL-30 (5/92) does contain a complete exclusion of **bodily injury** resulting directly or indirectly from lead poisoning caused by or aggravated by a condition on the **insured premises**. This notice is intended to alert **you** to this restriction of coverage and to advise **you** that loss information is available on request.

Disclosure Notice

Ed. 5/92