



ADDED RENTAL REIMBURSEMENT

Refer to Supplementary Declarations if information is not shown on this form.

We provide coverage under this endorsement subject to the *terms* contained in the *Business Automobile* Provisions.

Named Insured: _____.

Endorsement Effective Date _____, Endorsement Expiration Date _____.

AGREEMENT.

We the company agree with *you* as the named *insured*, in return for payment of the premium for this coverage, to provide additional rental reimbursement coverage to the scheduled *business automobile(s)* under the *terms* and conditions shown in this endorsement.

SCHEDULE

Coverage	Description of Covered Automobile	Amount per Day	Number of Days	Maximum per Occurrence
Comprehensive		\$		\$
		\$		\$
Collision		\$		\$
		\$		\$
Specified Causes		\$		\$
		\$		\$

WHAT WE PAY FOR.

We pay for additional rental expenses *you* necessarily incur for the rental of a comparable vehicle because of disablement of *your* covered *business automobile* by covered loss or damage. There is no deductible applicable to this coverage.

WHAT WE DO NOT PAY FOR.

1. We do not pay more than the larger of the reasonable and necessary expenses actually incurred or the applicable amount shown on *your* policy.
2. We do not pay such loss if there are other *business automobiles* available for *your* usage.
3. We do not pay any rental reimbursement expenses incurred within the first 24 hours following any occurrence of covered loss.
4. We do not pay any loss in excess of the number of days shown or for any loss occurring after expiration of the policy or expiration of this endorsement.
5. We pay only the excess, not exceeding the limits of insurance shown, over the amount payable under the physical damage portion of *your* policy when the *business automobile* is a covered total theft loss.
6. We do not pay for any additional loss resulting from *your* failure to take reasonable steps to effect the repair or replacement of the *business automobile* as promptly as possible.