



SUSPENSION OF INSURANCE **(New York)**

Refer to Supplemental 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.

AGREEMENT.

The company advises *you*, the first named *insured*, that subject to the policy *terms* and the New York Insurance Law that physical damage coverages are suspended under the conditions below.

Named Insured: _____

Effective Date: _____

WHAT WE DO NOT PAY FOR.

The physical damage coverage with respect to the covered *business automobile(s)* is suspended as of the effective date of this endorsement because of failure to comply with New York State inspection requirements.