



AN INDIVIDUAL AS THE INSURED

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.

We the company agree with **you** as the named *insured*, to make the following changes to accommodate **you**, an individual as the *insured*.

Named *Insured*: _____ .

Effective Date: _____ .

ADDITIONAL DEFINITIONS.

1. *Private passenger type automobile* means a van, sports utility vehicle or pick up type vehicle. A *private passenger type automobile* may not be used for *business*, other than farming.
2. *Non-owned Automobile* means a private passenger or station wagon type vehicle including vans, sport utility vehicles and pick up type vehicles which are not owned, available or furnished for the regular use of **you** or resident relatives of **your** household, while such *non-owned automobile* is in **your** custody or is being operated by **you** or any resident relative of **your** household.

CHANGES WITH RESPECT TO LIABILITY COVERAGES.

1. Exclusion 12 of form BA-20, The Fellow Employee Exclusion, does not apply to the resident relatives of **your** household or those of fellow employees.
2. While a covered *automobile* that **you** own is a *private passenger type automobile*, resident relatives of **your** household are *insureds*.
3. **You** and resident relatives of **your** household are *insureds* with respect to the use of *non-owned automobiles* provided:
 - a. that it is not an *automobile* owned by any resident relative of **your** household;
 - b. that it is not an *automobile* furnished or available for regular use by **you** or a resident relative of **your** household;
 - c. that it is not an *automobile* used by **you** or resident relatives of **your** household while working in the *business* of selling, servicing, storing, repairing or parking *automobiles*; and
 - d. that it is an *automobile* other than a *private passenger type automobile* used by **you** or resident relatives of **your** household while working in any other *business* or occupation.
4. Exclusion 4 of form BA-20, The pollution Exclusion, does not apply to a covered *automobile* of the *private passenger type*.
5. This additional exclusion applies when the covered *automobile* is a *private passenger type*. **We** do not provide coverage for *bodily injury* or *property damage* when an *insured* is also *insured* under a nuclear energy liability policy or would be so covered except for exhaustion of the policy limits.

CHANGES WITH RESPECT TO PHYSICAL DAMAGE COVERAGES.

Any *private passenger type automobile*, whether owned or non-owned, qualifies as a covered *automobile* with respect to physical damage coverage, if covered under this policy. However, **we** pay no more than \$500 if the *non-owned automobile* is a *trailer*.