



HIRED AUTOMOBILES DESIGNATED AS COVERED AUTOMOBILES YOU OWN

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.

Named Insured: _____.

Insured: _____.

Endorsement Effective Date: _____ Endorsement Expiration Date: _____.

AGREEMENT

We the company agree with *you* as **named insured**, in return for payment of the required premium, to provide coverage for the hired, leased or borrowed *automobile* scheduled below as an owned *automobile* under *your* coverage for which it is a covered *automobile*. We will also extend *insured* status to the owner or lessor of the rented or leased *automobile* but only with respect to that designated covered *automobile*.

SCHEDULE

Description of leased/rented *automobile(s)*: _____

All other *terms* and conditions remain unchanged.