



CHANGE ENDORSEMENT

This endorsement forms part of the policy shown below.

Policy No. _____ **Our** Name _____

Your Name: _____

Address (as shown on Declarations) _____

Effective Date of Endorsement: _____ Policy Period: _____ from: _____ to: _____

Agency _____ By _____

POLICY CHANGES

1. Limit of Liability changes: **PROPERTY COVERAGES**

	A.Residence	B.Related Private Structures	C.Personal Property	D.Additional Living Expense & Loss of Rent	E. Sched. Farm Pers. Prop. Total Limit	E.Blanket Farm Pers. Prop. Total Limit	F.Farm Structures Total Limit
From							
To							

2. Limit of Liability changes: **LIABILITY COVERAGE**

	L Personal Liability Each Occurrence	M Medical Payments Each Person
From		
To		

3. Other Changes (include Endorsement Numbers and Edition Dates).

PREMIUM ADJUSTMENT

Due at Endorsement Effective Date: Additional Premium \$ _____ Return Premium \$ _____

RATING INFORMATION IF YOU HAVE A DIFFERENT RESIDENCE

Residence Rating Information : Zone _____ Premium Group _____ Type _____
No. of Families or apartments _____ Protection _____
Miles from Department _____ Distance from Hydrant _____
Fire District _____ Construction : Frame ☐ Masonry ☐ Mobile Home ☐
Year _____ Serial number _____ Length _____ Width _____ Tie Downs _____
Make _____