



## 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. Limits of Liability changes:

<b>Single Limit Dual Limit TO</b>	Liability Coverage	Limits of Liability	
	Coverage L - <b><i>Bodily Injury/ Property Damage</i></b>	\$ each <b><i>occurrence</i></b>	\$ aggregate
	Coverage L - <b><i>Bodily Injury Property Damage</i></b>	\$ each <b><i>occurrence</i></b>	\$ aggregate
	Coverage M - Premises Medical	\$ each person	\$ each accident
	Coverage N - <b><i>Products/Completed Operations</i></b>	\$ each <b><i>occurrence</i></b>	\$ <b><i>products/completed operations</i></b> aggregate
	Coverage O - Fire Legal Liability	\$ each <b><i>occurrence</i></b>	
	*Coverage P - <b><i>Personal Injury &amp; Advertising Injury</i></b>	\$ each <b><i>occurrence</i></b>	\$ aggregate

<b>Single Limit Dual Limit FROM</b>	Liability Coverage	Limits of Liability	
	Coverage L - <b><i>Bodily Injury/ Property Damage</i></b>	\$ each <b><i>occurrence</i></b>	\$ aggregate
	Coverage L - <b><i>Bodily Injury Property Damage</i></b>	\$ each <b><i>occurrence</i></b>	\$ aggregate
	Coverage M - Premises Medical	\$ each person	\$ each accident
	Coverage N - <b><i>Products/Completed Operations</i></b>	\$ each <b><i>occurrence</i></b>	\$ <b><i>products/completed operations</i></b> aggregate
	Coverage O - Fire Legal Liability	\$ each <b><i>occurrence</i></b>	
	*Coverage P - <b><i>Personal Injury &amp; Advertising Injury</i></b>	\$ each <b><i>occurrence</i></b>	\$ aggregate

\* The Coverage P each ***occurrence*** limit and aggregate limit of liability is included within the Coverage L each ***occurrence*** limit and aggregate limit.

#### 2. Other Changes (Include Endorsement Numbers and Edition Dates).

### PREMIUM ADJUSTMENT

	Additional Premium	Return Premium
Due at Endorsement Effective Date:	\$	\$
N.Y.S. Fire Premium Fee (if applicable):	\$	\$

REVISED INSTALLMENT PAYMENTS (Applies to three-year installment policies).

Dates Due	Original Installments	Increase	Decrease	Revised Installments
	\$	\$	\$	\$
	\$	\$	\$	\$
Total Premium to Policy Expiration:		\$	\$	\$
N.Y.S. Fire Premium Fee (if applicable):		\$	\$	\$