



DELUXE BUSINESSOWNERS COVERAGE SUPPLEMENTAL DECLARATIONS

This Supplemental Declarations forms a part of *your* Businessowners policy.

Listed below are the forms and other information related to *your* policy. For descriptions of coverage, limitations and exclusions refer to the General Policy Provisions, Causes of Loss form(s), General Liability Coverage and all other endorsements that form a part of *your* policy.

Replacement cost policies must include an applicable replacement cost endorsement.

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|--|---|
| <input type="checkbox"/> Actual Cash Value: Coverage A-Building | <input type="checkbox"/> Replacement Cost: Coverage A-Building |
| <input type="checkbox"/> Actual Cash Value: Coverage B- <i>Business</i> Property | <input type="checkbox"/> Replacement Cost: Coverage B- <i>Business</i> Property |

SF-311D MANDATORY COVERAGES

INCLUDED COVERAGES	INCLUDED	ADDITIONAL	TOTAL
Accounts Receivable	\$1,000	\$ _____	\$ _____
<i>Additional Expense</i>	\$1,000	\$ _____	\$ _____
Building Inflation Protection	1%	_____ %	_____ %
Debris Removal	Refer to SF-311D		
<i>Employee Dishonesty</i>	\$1,000	\$ _____	\$ _____
Exterior Signs	\$1,000	\$ _____	\$ _____
<i>Loss Of Income</i>	6 Months	_____ Months	_____ Months
<i>Money And Securities</i>	\$1,000 On the <i>insured premises</i>	\$ _____	\$ _____
	\$1,000 Off the <i>insured premises</i>	\$ _____	\$ _____
Seasonal Variation	25% increase	_____ %	_____ %
	Three-month period from _____ to _____		
	Additional period (optional) from _____ to _____		
<i>Sprinkler Leakage</i>	Refer to SF-311D		
Valuable Papers And Records	\$1,000	\$ _____	\$ _____

INCLUDED COVERAGES	INCLUDED	ADDITIONAL	TOTAL
While Away From The <i>Insured Premises</i>	15%, up to \$5,000	\$ _____	
Fire Legal Liability	\$50,000	\$ _____	\$ _____
Medical Payments	\$1,000 Per person \$25,000 Per accident		\$ _____ \$ _____
<i>Personal And Advertising Injury</i> Liability	Refer to SF-311D		

SF-311D OPTIONAL COVERAGES

Coverage included only if information provided below.

Building Ordinance Or Law (SF-315)	\$ _____
<i>Loss Of Income</i> From <i>Dependent Property</i> (SF-318)	\$ _____
Newly Acquired Or Constructed Property (SF-320)	\$ _____ Building \$ _____ <i>Business</i> property
Personal Articles (SF-322)	\$ _____
<i>Pollutant</i> Cleanup And Removal (SF-323)	\$ _____
<i>Refrigerated Property</i> (SF-324)	\$ _____
Transportation (SF-327)	\$ _____