

SEASONAL VARIATION ENDORSEMENT

Refer to the Supplemental Declarations if information is not shown on this form.

For an additional premium, *we* provide coverage under this endorsement subject to the *terms* contained in the General Policy Provisions.

You have requested that *we* vary the amount of coverage on *your business* property to apply each month as shown below. The Co-insurance Clause which is found in Form SF-20 applies to this coverage.

COVERAGE APPLICABLE DURING THE MONTH OF	АМО	UNT
JANUARY	\$	
FEBRUARY	\$	
MARCH	\$	
APRIL	\$	
MAY	\$	
JUNE	\$	
JULY	\$	
AUGUST	\$	
SEPTEMBER	\$	
OCTOBER	\$	
NOVEMBER	\$	
DECEMBER	\$	
Average Value for Rating Purposes-		\$

All other terms and conditions remain as written.

Authorized Signature

(Attach To Change Endorsement If Issued After Policy Is Written).