AMENDED LIMITS OF LIABILITY

Refer to Supplemental Declarations if information is not shown on this form.
For a rate credit, ***we*** provide coverage under this endorsement subject to the ***terms*** contained in the General Policy Provisions.
Policy No. _____
Named insured _____
The Liability Coverage and Limit of Liability shown on the Declarations, Supplemental Declarations or other attached endorsement is deleted and replaced as shown below.

WHAT *WE* PAY FOR

We pay for ***bodily injury*** and ***property damage*** caused by a covered ***occurrence*** subject to the following provisions:
Per ***Occurrence*** $ _____ limit of liability.
Annual Aggregate $ _____ limit of liability.

SPECIAL CONDITIONS

The annual aggregate limit of liability specifies the maximum amount ***we*** pay for ***bodily injury*** and ***property damage*** occurring within the effective dates of this endorsement; without regard to the number of ***occurrences***, ***insureds,*** claims made or persons injured.