SIDING AND/OR ROOFING MATCHING COVERAGE

Refer to 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.

WHAT WE PAY FOR

We will reimburse ***you*** for the cost to replace any of the undamaged vinyl or aluminum siding and/or composition shingle roofing of the ***insured premises*** with materials of equivalent kind and quality that are substantially similar to those materials that were damaged by a covered cause of loss.

This coverage applies in excess of ***your*** stated deductible.

This coverage applies only in the event that the same siding and/or roofing material is no longer available for the damaged portion of the ***insured premises*** and this coverage shall not apply in the event that any mismatch is caused solely by weathering, fading, or routine wear and tear.

AMOUNT OF INSURANCE

The Amount of Insurance shown either on this form or on the Supplemental Declarations is the maximum ***we*** will pay for siding and/or roofing matching coverage.

The Amount of Insurance for siding and/or roofing matching coverage is: $_____.

ADDITIONAL CONDITIONS

Payment under this coverage to the siding and/or roofing will not be made until replacement of the siding and/or roofing is completed.

All other ***terms*** and conditions remain unchanged.