OFFICE, PROFESSIONAL, PRIVATE SCHOOL OR STUDIO USE-*INSURED PREMISES*

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.

This policy covers the following ***business*** which is conducted by an ***insured*** on the ***insured premises***:

_____

(Description of *Business*)

The ***business*** is conducted in either:

- ☐ the ***residence*** covered under Coverage A; or
- ☐ a related private structure on the ***insured premises*** (describe).

_____

PROPERTY COVERAGES

1. If the ***business*** is conducted in a related private structure as described above, ***we*** cover the structure for direct loss caused by perils insured against as described and limited in the Perils Section.
   We pay no more than the limit of liability shown in this endorsement.

   Limit of Liability $ _____.

   Neither Coverage A nor Coverage B applies to this structure.

2. Coverage C—Personal Property—Under 5. Limitations on Certain Property, item i. is amended as follows: The $500 limitation for ***business*** property on the ***insured premises*** does not apply to furnishings, supplies and equipment pertaining to the ***business*** described in this endorsement.

LIABILITY COVERAGE SECTION

Medical Payments To Others: included ☐

1. Medical Payments To Others coverage does not apply under this endorsement unless shown as included by an 'x' in the box.
2. Under Incidental Liability and Medical Payments Coverages, the following item is added to 7. Incidental Business coverage:
   f. ***business*** activities of an ***insured*** which pertain to the use of the ***insured premises*** as described in the Office, Professional, Private School or Studio Use endorsement.
3. If Medical Payments To Others coverage is shown above as included, exclusion b. under 3. Exclusions that Apply only to Medical Payments To Others does not apply to the ***business*** described in this endorsement.
4. This insurance does not apply to ***bodily injury*** to:
   a. an employee of an ***insured*** arising out of the business use described above other than a person while performing duties as a ***domestic employee*** of an ***insured***; or
   b. a pupil arising out of corporal punishment administered by or at the direction of the ***insured***.