EARTHQUAKE LOSS ASSESSMENT COVERAGE FOR HOMEOWNERS

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.

Limit of Liability $ _____ per ***occurrence***
We agree to pay ***your*** share of an assessment made by ***your*** homeowners association and charged against all the members of the association up to the limit of liability stated in this endorsement. This coverage applies only when the assessment results from direct loss from earthquake to property owned collectively by all association members (common elements).
One or more earthquake shocks that occur within a 72 hour period constitute a single ***occurrence***.

DEDUCTIBLE

Item 1. c. Deductible under **How Much *We* Pay for Loss or Claim** is replaced by the following with respect to this coverage.

> ***Deductible- We*** pay only that part of ***your*** share of the assessment for each earthquake ***occurrence*** which is more than 5 percent of the limit of liability stated in this endorsement. This deductible amount shall not be less than $250 in any one ***occurrence***. No other deductible applies to this coverage.

SPECIAL EXCLUSION

We do not cover any assessment made as a result of loss caused directly or indirectly from flood of any nature or tidal wave, whether caused by, resulting from, contributed to, or aggravated by earthquake.