INSURANCE BY MORE THAN ONE COMPANY

Refer to Supplemental Declarations if information is not shown on this form.
For an additional premium, ***we*** ***We*** provide coverage under this endorsement subject to the ***terms*** contained in the General Policy Provisionsprovisions.
We and other insurers share the total
The amount of insurance covering ***your premises***. ***We*** provide shown in the Declarations is _____% of the total applicable of all contributing insurance and ***we*** will pay this. ***Our*** liability is limited to that percentage of any covered loss but not more than the amount of insurance stated in the Declarations or on any endorsement made part of this policy.
The amount of insurance, any special limit or other limitation on the and shall not exceed the applicable amount of insurance shown in this policy shall be the amount of all insurance. ***We*** shall pay no more than the lesser of ***our*** percentage share of the amount of insurance or, ***our*** percentage share of the amount of the covered loss to ***your*** propertythe Declarations.
The total amount of all insurance, including this policy, is: $_____

COVERAGES	TOTAL AMOUNT OF INSURANCE

Our insurance contributes to:

Coverages

☐ A.	***Residence***	$_____
☐ B.	Related Private Structures on the Premises	$_____
☐ C.	Personal Property	$_____
☐ D.	Additional Living Expense and Loss of Rent Coverage	$_____
☐ E.	Additional Coverage (specify)	$

Other (specify)

☐ _____
☐ _____
☐ _____

When not provided by ***us***, the **Personal Liability** and liability insurance and Medical Payments **To Others** coverage are(when applicable) is provided by
Policy No.
policy no. _____ issued by _____
(company)

HOW MUCH *WE* PAY FOR LOSS OR CLAIM

Paragraph 4. Insurance Under More Than One Policy does not apply to policies issued by another company under the ***terms*** of this endorsement.