ALL HAZARDS IN CONNECTION WITH DESIGNATED PREMISES ~~ADDITIONAL~~ EXCLUSION
~~(All Hazards in Connection With Designated Premises)~~

Refer to the ~~Supplemental~~ Declarations if information is not shown on this form.
~~The exclusion under this~~This endorsement is subject to the ***terms*** contained in ~~the Liability coverage~~***your*** policy.

SCHEDULE

Description and location of designated premises:

WHAT *WE* DO NOT PAY FOR

The following exclusion is added to ~~the EXCLUSIONS shown in the~~ Coverage L-***Bodily Injury*** And ***Property Damage***, and when applicable to ***your*** policy, Coverage P-***Personal And Advertising Injury*** Liability ~~coverage~~.

1. ***We*** do not pay for ~~loss resulting directly or indirectly from~~ ***bodily injury*** ~~and/or~~, ***property damage***, and when applicable to ***your*** policy, ***personal and advertising injury***, arising out of:
   a. The1. ~~the~~ ownership, maintenance or use of the ~~premises~~ designated ~~in this endorsement~~premises shown in the Schedule or any property located on such premises;
   ~~2. operations~~b.Operations on the designated premises shown in the Schedule or elsewhere which are necessary or incidental to, the ownership, maintenance, or use of ~~the~~such premises; or
   ~~3. goods~~c.Goods or products manufactured~~,~~ or stored at, or distributed ~~and/or stored at~~from, the designated premises shown in the Schedule.

~~**Description and location of premises:**~~

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

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