CHANGE ENDORSEMENT

Refer to the Declarations if information is not shown on this form.
This endorsement forms partis subject to the ***terms*** of the***your*** policy shown below..

Policy No. _____ ***Our*** Name _____
Your Name _____
Address (as shown on Declarations) _____
Effective Date of Endorsement _____ Policy Period _____ from _____ to _____
Agency _____ By _____

POLICY CHANGES

1. Limits of Liabilityliability changes:

	Liability Coverage	Limits ofOf Liability	
Single Limit	Coverage L - ***Bodily Injury*** And ***Property Damage***	$ each ***occurrence***	$ aggregate
Dual Limit TO	Coverage L - ***Bodily Injury*** ***Property Damage***	$ each ***occurrence*** $ each ***occurrence***	$ aggregate
	Coverage M - Premises Medical Payments	$ each person	$ each accident
	Coverage N - Products/Completed Operations	$ each ***occurrence***	$ ***products/completed operations*** $ Products/Completed Operations aggregate
	Coverage O - Fire Legal Liability	$ each ***occurrence***	
	*Coverage P - ***Personal Injury &And Advertising Injury*** Liability	$ each ***occurrence***	$ aggregate

	Liability Coverage	Limits ofOf Liability	
Single Limit	Coverage L - ***Bodily Injury*** And ***Property Damage***	$ each ***occurrence***	$ aggregate
Dual Limit FROM	Coverage L - ***Bodily Injury*** ***Property Damage***	$ each ***occurrence*** $ each ***occurrence***	$ aggregate
	Coverage M - Premises Medical Payments	$ each ***person***	$ each accident
	Coverage N - Products/Completed Operations	$ ___ each ***occurrence***	$ ***products/completed operations*** $ Products/Completed Operations aggregate
	Coverage O - Fire Legal Liability	$ each ***occurrence***	
	*Coverage P - ***Personal Injury &And Advertising Injury*** Liability	$ each ***occurrence***	$ aggregate

* The Coverage P each ***occurrence*** limit and aggregate limit of liability is included within the Coverage L each ***occurrence*** limit and aggregate limit.

2. Other Changes (Include Endorsement Numberschanges (include form numbers and Edition Dates). edition dates).

PREMIUM ADJUSTMENT

Due at endorsement effective date:	Additional Premium	Return Premium
	$	$

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N.Y.S. Fire ~~Premium~~Insurance Fee (if applicable): $ —— $ ——

REVISED INSTALLMENT PAYMENTS (Applies to three-year installment policies).

Dates Due	Original Installments	Increase	Decrease	Revised Installments
	$	$	$	$
	$	$	$	$
Total ~~Premium~~premium to ~~Policy Expiration~~policy expiration:		$	$	$
N.Y.S. Fire ~~Premium~~Insurance Fee (if applicable):		$	$	$

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