CONDOMINIUMS AND SHARED OWNERSHIP HOUSING

Refer to Supplemental Declarations if information is not shown on this form.
We provide coverage under this endorsement subject to the ***terms*** contained in the General Policy Provisions.

DEFINITIONS-The following modifications are applicable when this endorsement is in effect:

7a.4) If ***you*** own the Condominium Unit, Cooperative, Apartment or rented premises described in the Declarations, the ***insured premises*** means the parts of the described location which are occupied exclusively by ***you*** and ***your*** household for residential purposes. If that space is rented or held for rental to others, the ***insured premises*** means the parts of the described location which are rented, or held for rental, to others for residential purposes.

12. ***Residence***-means the unit where ***you*** reside or that unit which ***you*** own but rent or hold for rental to others as shown in the Declarations. ***Residence*** includes other real property which pertains exclusively to the ***Residence*** and which is ***your*** insurance responsibility under a corporation or association of property owners agreement.

INCIDENTAL COVERAGES-The following agreement is added:

9 **Loss Assessment**-***We*** will pay up to $2500 on ***your*** share of any loss assessment charged to ***you*** during the policy period by a corporation or association of property owners. This agreement applies when the assessment is made as a result of direct loss to property owned by all of the members collectively, caused by a covered cause of loss under Coverage A-Residence. This coverage applies only to assessments levied against ***you*** as the owner of the ***insured premises***.

We will not pay more than $1000 of ***your*** assessment that results from a deductible in the insurance policy purchased by a corporation or association of property owners.

WHAT *WE* DO NOT COVER

1. ***We*** do not cover loss assessments arising from earthquake, land shock waves or tremors, before, during and after a volcanic eruption, unless specifically insured.
2. ***We*** do not cover loss assessments charged against ***you*** or a corporation or association of property owners by any governmental body.

ADDITIONAL CONDOMINIUM LOSS ASSESSMENT COVERAGE

For an additional premium, ***we*** provide optional additional condominium loss assessment coverage.

We will pay up to $ _____, as an additional amount on ***your*** share of any loss assessment charged to ***you*** during the policy period by a corporation or association of property owners. This additional agreement applies when the assessment is made as a result of direct loss to property owned by all members collectively, caused by a covered loss under Coverage A-Residence. This additional coverage applies only to assessments levied against ***you*** as the owner of the ***insured premises***.

We will pay up to $ _____, as an additional amount of ***your*** assessment that results from a deductible in the insurance policy purchased by a corporation or association of property owners.

WHAT *WE* DO NOT COVER

1. ***We*** do not cover loss assessments arising from earthquake, land shock waves or tremors, before, during and after a volcanic eruption, unless specifically insured.
2. ***We*** do not cover loss assessments charged against ***you*** or a corporation or association of property owners by any governmental body.