CONDOMINIUM UNIT OWNERS / COOPERATIVE APARTMENT SHARED OWNERSHIP ENDORSEMENT ADDITIONAL LOSS ASSESSMENT~~S~~ COVERAGE

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.

~~Amount of Insurance $~~ The Loss Assessment Coverage under ***your*** policy has been increased to be: $ _____. This is the total amount of Loss Assessment Coverage available under ***your*** policy.

~~We pay ***your*** share of an assessment by ***your*** condominium association charged against all condominium unit owners, but, not to exceed the amount of insurance shown above.~~
~~Coverage applies only when:~~
~~1. the assessment results from direct loss to condominium property owned in common by all unit owners caused by a covered cause of loss (other than earthquake) shown in the Condominium Unit Owner Additions coverage under Incidental Property Coverages;~~
~~2. the assessment results from an ***occurrence*** covered under the Liability Coverage Section of this policy;~~

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~~3. the assessment is for damages and legal fees the association is obligated to pay because of acts of a director (or trustee) resulting from the exercise of their duties on behalf of the association; or~~

~~4. the assessment results from damages the association is legally obligated to pay because of personal injury. Personal injury means injury, other than ***bodily injury***, for which the association is liable because of:~~

~~a. false arrest, detention, imprisonment, or malicious prosecution;~~

~~b. wrongful entry into or eviction of a person from, a room, dwelling or premises that the person occupied; or~~

~~c. a publication or utterance which~~

~~1) libels or slanders a person or organization or disparages a person's or organization's goods, products or services;~~

~~2) is in violation of an individual's right to privacy.~~

~~DEDUCTIBLE~~

~~Item 1. c. Deductible under **How Much *We* Pay for Loss or Claim** is replaced by the following:~~

~~**Deductible** ***We*** pay only that part of ***your*** share of the assessment that exceeds $250, but not more than the amount of insurance in this endorsement.~~

~~No other deductible applies to this coverage.~~

~~SPECIAL LIMIT~~

~~***We*** do not pay more than $1000 of ***your*** assessment which results from a deductible in the insurance purchased by the condominium association.~~All other ***terms*** and conditions remain unchanged.

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