RELATED PRIVATE STRUCTURES RENTED TO OTHERS (1 or 2 Families)

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.

We cover the following related private structures on the ***insured premises*** rented or held for rental for residential purposes to any person, other than a tenant of the covered ***residence***.

PROPERTY COVERAGES

We cover these structures for direct loss ~~caused~~ by ~~perils insured against as described and limited~~causes of loss shown in the ~~Perils~~Causes of Loss Section for the ~~limit of liability~~amount of insurance stated in this endorsement.

	Identification of Structures	**~~Limit~~Amount of ~~Liability~~Insurance**	**Number of Families**
1.			
2.			
3.			

LIABILITY COVERAGE SECTION

Medical Payments to Others: included ☐

Medical Payments to Others coverage applies only if shown as included by an "x" in the box.

Under Coverage L—Personal Liability and Coverage M—Medical Payments to Others (if included), the structures listed in this endorsement are included in the definition of ***insured premises***.