



## OTHER RESIDENCE 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.

The premises at the location described in this endorsement are *insured premises* as defined and limited in the Definitions of this policy.

This insurance applies only to the premises described in this endorsement or in the Declarations under Other Residence Coverage. The amount of insurance at this location for each property coverage shall not be more than the amount stated for such coverage.

Location of Premises				
Coverage	A Residence	B Related Private Structures on the Premises	C Personal Property	D Additional Expense & Loss of Rent Coverage
Amount of Insurance	\$	\$	\$	\$
Deductible: \$ Causes of Loss except (state amount) Theft Wind Hail Deductible Endorsement(s)				
Mortgagee or Secured Party.				
Other Endorsements that apply only to this location.				
Form: ML-1, 2, 3, 5, or 8 Number of Families: 1, 2, 3, 4 Owner Occupied: Yes No Year of Construction Replacement Cost ACV Townhouse: Families within Fire Division: 1-2 3-4 5-8 9-over				
Mobile Home: With Enclosed Foundation: Manufacturer Serial or Model #; Length, Width Cost New \$ Construction: Frame; Brick, Stone, or Masonry Veneer; Brick, Stone or Masonry; Stucco; Aluminum, Plastic or Steel Siding over Frame; Fire Resistive; Modular Home rated as Frame; Specifically Rated; Approved Roof; Unapproved Roof				
Tenant Number of Apartments 1-4 5-10 11-40 Over 40 Condominium Unit-Owner Self Rating Yes No Annual Fire & EC Rate				
Distance to: Fire Hydrant Feet. Fire Dept. Miles. Fire Dist. or Town Fire Protection: Protected, Semi-Protected, Unprotected, Other Premium Group: County/Subcounty Deductible Type: Flat Disappearing Terr. Liability Coverage Section: ML-9, ML-10				
(a) no <i>business</i> * activities are conducted on the described premises; (b) the <i>insured</i> has no full time <i>domestic employee(s)</i> ; (c) the <i>insured</i> has no outboard motor(s) or watercraft otherwise excluded under this policy for which coverage is desired. Exception; if any, to (a), (b), or (c)**.				
* <i>Business</i> includes farming **Absence of an entry means no exception				
Special State Provisions: New York Coinsurance Clause Applies: Yes ; No				