EXCLUSIONARY ENDORSEMENT

| It is agreed that the liability coverages, Coverage L-Premises Liability and |
|--|
| Coverage M-Medical Payments to Others, of your policy DO NOT APPLY to |
| claims for injury to persons or damage to property caused by any dog owned |
| by you, or the residents of your household, or in your care, or the care of the |
| residents of your household, or owned by a tenant, or the residents of a tenant, |
| or in the tenant's care or the care of the resident's of a tenant. |

| Insured's Signature _ | | Date | |
|---|--|------|--|
| (to be signed only when added by endorsement) | | | |