



INSURANCE BY MORE THAN ONE COMPANY

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.

The amount of insurance shown in the Declarations is _____% of the total of all contributing insurance. **Our** liability is limited to that percentage of any covered loss and shall not exceed the applicable amount of insurance shown in the Declarations.

Our insurance contributes to:

Coverages

- ☐ A. Residence
- ☐ B. Related Private Structures
- ☐ C. Personal Property
- ☐ D. Additional Living Expense
- ☐ E. Other (specify)

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

When not provided by **us**, liability insurance and Medical Payments coverage (when applicable) is provided by policy no. _____ issued by _____

HOW MUCH WE PAY FOR LOSS OR CLAIM

Paragraph 4. Insurance Under More Than One Policy does not apply to policies issued by another company under the **terms** of this endorsement.