



WHILE AWAY FROM THE *INSURED PREMISES*

Refer to the Declarations if information is not shown on this form.

The coverage under this endorsement is subject to the *terms* contained in *your* policy.

Amount of Insurance: \$ _____

WHAT WE PAY FOR

We pay up to the Amount of Insurance shown above for accidental direct physical loss or damage to *your* covered property from a covered cause of loss while it is temporarily away from the *insured premises*:

1. At locations *you* do not own, operate or lease; or
2. At any fair, trade show or exhibition.

WHAT WE DO NOT PAY FOR

This coverage does not apply to property:

1. In or on a vehicle;
2. At any off premises job site where *you* are conducting operations; or
3. In the care, custody or control of *your* salespeople, unless the property is in such care, custody or control at a fair, trade show or exhibition.

This coverage is in addition to any other While Away From The *Insured Premises* contained in *your* policy.

All other *terms* and conditions remain unchanged.