

ADDITIONAL INSURED
(Use with Forms HO-A, HO-B and HO-CON-B)

Name of Additional Insured(s): _____

Address: _____

Interest: _____

Location of Premises: _____

This policy is amended as follows (check the box that applies):

SECTION I PROPERTY COVERAGE (PREMISES DESIGNATED ABOVE).

The definition of **insured** includes the additional insured(s) named above.

NON-OCCUPANT – SECTION II LIABILITY COVERAGE (PREMISES DESIGNATED ABOVE).

Under Coverage C (Personal Liability):

1. The definition of **insured** includes the additional insured(s) named above. This provision applies only to the ownership, maintenance or use of the premises shown above and operations relating to that premises.
2. This coverage does not apply to **bodily injury** to an employee arising out of or in the course of the employee's employment by the additional insured(s). However, the coverage does apply if the additional insured(s) is your partner in the maintenance of a farm shown above.

OCCUPANT – SECTION II LIABILITY.

Under Section II Liability:

The definition of **insured** includes the additional insured(s) named above. This provision applies only if the additional insured(s) is an occupant of the residence premises.