

SERFF Tracking Number: ARKS-125381342 State: Arkansas
Filing Company: 11800 - FOREMOST PROPERTY & CASUALTY State Tracking Number: #3310043100 \$50
INS CO
Company Tracking Number: D-7
TOI: 04.0 Homeowners Sub-TOI: 04.0002 Mobile Homeowners
Product Name: Homeowners
Project Name/Number: /

Filing at a Glance

Company: 11800 - FOREMOST PROPERTY & CASUALTY INS CO

Product Name: Homeowners	SERFF Tr Num: ARKS-125381342	State: Arkansas
TOI: 04.0 Homeowners	SERFF Status: Closed	State Tr Num: #3310043100 \$50
Sub-TOI: 04.0002 Mobile Homeowners	Co Tr Num: D-7	State Status: Fees verified and received
Filing Type: Form	Co Status:	Reviewer(s): Becky Harrington, Betty Montesi, Brittany Yielding
	Author:	Disposition Date: 12/10/2007
	Date Submitted: 12/07/2007	Disposition Status: Approved
Effective Date Requested (New): 05/01/2008		Effective Date (New): 05/01/2008
Effective Date Requested (Renewal): 05/01/2008		Effective Date (Renewal): 05/01/2008

State Filing Description:

4 forms

General Information

Project Name:	Status of Filing in Domicile:
Project Number:	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 12/10/2007	
State Status Changed: 12/10/2007	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

Company and Contact

Filing Contact Information

SERFF Tracking Number: ARKS-125381342 State: Arkansas
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Product Name: Homeowners
Project Name/Number: /

NA NA, NA@NA.com
NA (123) 555-4567 [Phone]
NA, AR 00000

Filing Company Information

11800 - FOREMOST PROPERTY & CASUALTY INS CO CoCode: 11800 State of Domicile: Michigan
PO BOX 2450 Group Code: 238 Company Type: Property & Casualty
GRAND RAPIDS, MI 49501-2450 Group Name: State ID Number:
(616) 956-8284 ext. [Phone] FEIN Number: 35-1604635

SERFF Tracking Number: ARKS-125381342 State: Arkansas
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Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Becky Harrington	12/10/2007	12/10/2007

SERFF Tracking Number: ARKS-125381342 State: Arkansas
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Product Name: Homeowners
Project Name/Number: /

Disposition

Disposition Date: 12/10/2007

Effective Date (New): 05/01/2008

Effective Date (Renewal): 05/01/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ARKS-125381342 State: Arkansas
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	ARKS-125381342		No
Form		Approved	Yes

SERFF Tracking Number: ARKS-125381342 State: Arkansas
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 Product Name: Homeowners
 Project Name/Number: /

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved		5640		Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 Previous Filing #:		
Approved		5923		Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 Previous Filing #:		
Approved		5975		Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 Previous Filing #:		
Approved		6005		Endorsement/Amendment/Conditions New		0.00	

SERFF Tracking Number: ARKS-125381342 State: Arkansas
Filing Company: 11800 - FOREMOST PROPERTY & CASUALTY State Tracking Number: #3310043100 \$50
INS CO
Company Tracking Number: D-7
TOI: 04.0 Homeowners Sub-TOI: 04.0002 Mobile Homeowners
Product Name: Homeowners
Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: ARKS-125381342 State: Arkansas
Filing Company: 11800 - FOREMOST PROPERTY & CASUALTY State Tracking Number: #3310043100 \$50
INS CO
Company Tracking Number: D-7
TOI: 04.0 Homeowners Sub-TOI: 04.0002 Mobile Homeowners
Product Name: Homeowners
Project Name/Number: /

Supporting Document Schedules

Review Status:

Satisfied -Name: ARKS-125381342

12/10/2007

Comments:

Attachment:

ARKS-125381342.pdf

Property & Casualty Transmittal Document - Arkansas

BH

1. Reserved for Insurance Dept. Use Only

Approved until withdrawn or revoked

DEC 10 2007

Arkansas Insurance Department

DA

2. Insurance Department Use only

a. Date the filing is received: CV# 33/0043100

b. Analyst:

c. Disposition: \$ 50

d. Date of disposition of the filing:

e. Effective date of filing:

New Business	
Renewal Business	

f. State Filing #:

g. SERFF Filing #: ARCS-16381342

h. Subject Codes

3. Group Name				Group NAIC #	0212
4. Company Name(s)	Domicile	NAIC #	FEIN #		
Foremost Property and Casualty Insurance Company	Michigan	11800	35-1604635		

5. Company Tracking Number D-7

Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Kaan Cidanli Foremost Property and Casualty Insurance Company P. O. Box 2450 Grand Rapids, Michigan 49501-2450	State Filings Administrator	616-956-3645	616-956-2093	kaan.cidanli@foremost.com

RECEIVED

DEC 07 2007

7. Signature of authorized filer

8. Please print name of authorized filer: Kaan Cidanli

PROPERTY AND CASUALTY DIVISION
ARKANSAS INSURANCE DEPARTMENT

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	4.0000
10. Sub-Type of Insurance (Sub-TOI)	4.0002
11. State Specific Product code(s)(if applicable)[See State Specific Requirements]	n/a
12. Company Program Title (Marketing title)	Mobile Home Insurance Program
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: May 1, 2008 Renewal: May 1, 2008
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	n/a
17. Reference Organization # & Title	n/a
18. Company's Date of Filing	December 3, 2007
19. Status of filing in domicile	<input checked="" type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # D-7

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

Honorable Mike Pickens
Commissioner of Insurance
Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

RE: Foremost Property and Casualty Insurance Company
NAIC #212-11800
Mobile Home Insurance Program
Revision to the Form Section

Dear Mr. Pickens:

We submit this filing for your formal stamp of approval or acknowledgement.

The enclosed Summary of Revisions has been developed to assist your review of this filing.

The following rule of implementation will apply:

This filing will be effective for all new and renewal policies written to be effective on and after May 1, 2008. No policy effective prior to the above date is to be cancelled and rewritten to take advantage of or to avoid the application of this filing except at the request of the insured.

For your convenience, we have enclosed a duplicate for you to note with your approval or acknowledgement and return to us for our files.

KKC/ds

Enclosures: Check - \$50.00
Transmittal Forms
Summary of Revisions
Table of Contents
Forms
Return Envelope

22. Filing Fees (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: 3310043100
Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

FORM FILING SCHEDULE

(This form must be provided **ONLY** when making a filing that includes forms)
 (Do **not** refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	D-7
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	D-6

3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement Or withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Replacement Cost Personal Property	5640 06/99	[] New [<input checked="" type="checkbox"/>] Replacement [] Withdrawn	5619 02/98	
02	Additional Coverage Endorsement	5923 11/06	[] New [<input checked="" type="checkbox"/>] Replacement [] Withdrawn	5662 10/01	
03	Additional Coverage Endorsement	5975 05/04	[] New [<input checked="" type="checkbox"/>] Replacement [] Withdrawn	5663 10/01	
04	Central Alarm Discount	6005 04/04	[<input checked="" type="checkbox"/>] New [] Replacement [] Withdrawn		
05			[] New [] Replacement [] Withdrawn		
06			[] New [] Replacement [] Withdrawn		
07			[] New [] Replacement [] Withdrawn		
08			[] New [] Replacement [] Withdrawn		
09			[] New [] Replacement [] Withdrawn		
10			[] New [] Replacement [] Withdrawn		

PC FFS-1

ARKANSAS INSURANCE DEPARTMENT
PROPERTY AND CASUALTY DIVISION

RULE AND REGULATION 29
REVISED CERTIFICATE OF COMPLIANCE

INSURER NAME AND NAIC NUMBER: Foremost Property and Casualty Insurance Company
212-11800

DESCRIPTION: Replacement Cost Personal Property

FORM NUMBER: 5640

EDITION DATE: 06/99

This is to certify that the above captioned property and/or casualty policy form has achieved a Flesch Reading Ease Test score of 48.259, and complies with the requirements of Act 517 of 1981, the Property and Casualty Insurance Policy Simplification Act, codified as Ark. Stat. Ann. §§23-80-301--23-80-308, and complies with Department Rule and Regulation 29.



Signature of Officer of Company

Assistant Vice President

Title

If a policy is scored by a method other than Flesch Reading Ease Test, the alternate method should be explained in detail.

ARKANSAS INSURANCE DEPARTMENT
PROPERTY AND CASUALTY DIVISION

RULE AND REGULATION 29
REVISED CERTIFICATE OF COMPLIANCE

INSURER NAME AND NAIC NUMBER: Foremost Property and Casualty Insurance Company
212-11800

DESCRIPTION: Additional Coverage Endorsement

FORM NUMBER: 5923

EDITION DATE: 11/06

This is to certify that the above captioned property and/or casualty policy form has achieved a Flesch Reading Ease Test score of 45.410, and complies with the requirements of Act 517 of 1981, the Property and Casualty Insurance Policy Simplification Act, codified as Ark. Stat. Ann. §§23-80-301--23-80-308, and complies with Department Rule and Regulation 29.



Signature of Officer of Company

Assistant Vice President

Title

If a policy is scored by a method other than Flesch Reading Ease Test, the alternate method should be explained in detail.

ARKANSAS INSURANCE DEPARTMENT
PROPERTY AND CASUALTY DIVISION

RULE AND REGULATION 29
REVISED CERTIFICATE OF COMPLIANCE

INSURER NAME AND NAIC NUMBER: Foremost Property and Casualty Insurance Company
212-11800

DESCRIPTION: Additional Coverage Endorsement

FORM NUMBER: 5975

EDITION DATE: 05/04

This is to certify that the above captioned property and/or casualty policy form has achieved a Flesch Reading Ease Test score of 46.318, and complies with the requirements of Act 517 of 1981, the Property and Casualty Insurance Policy Simplification Act, codified as Ark. Stat. Ann. §§23-80-301--23-80-308, and complies with Department Rule and Regulation 29.



Signature of Officer of Company

Assistant Vice President

Title

If a policy is scored by a method other than Flesch Reading Ease Test, the alternate method should be explained in detail.

ARKANSAS INSURANCE DEPARTMENT
PROPERTY AND CASUALTY DIVISION

RULE AND REGULATION 29
REVISED CERTIFICATE OF COMPLIANCE

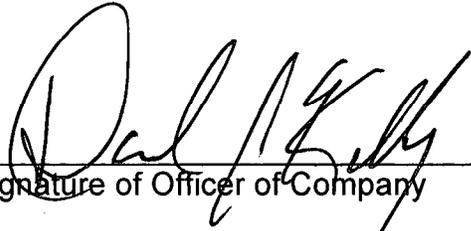
INSURER NAME AND NAIC NUMBER: Foremost Property and Casualty Insurance Company
212-11800

DESCRIPTION: Central Alarm Discount

FORM NUMBER: 6005

EDITION DATE: 04/04

This is to certify that the above captioned property and/or casualty policy form has achieved a Flesch Reading Ease Test score of 53.036, and complies with the requirements of Act 517 of 1981, the Property and Casualty Insurance Policy Simplification Act, codified as Ark. Stat. Ann. §§23-80-301--23-80-308, and complies with Department Rule and Regulation 29.



Signature of Officer of Company

Assistant Vice President

Title

If a policy is scored by a method other than Flesch Reading Ease Test, the alternate method should be explained in detail.

**Foremost[®] Property and
Casualty Insurance Company**

ARKANSAS

MOBILE HOME INSURANCE PROGRAM

SUMMARY OF REVISIONS

FORM SECTION

Form 5640 06/99 – Replacement Cost Personal Property

This form replaces Form 5619 02/98 – same title. Please refer to Exhibit I for details.

Form 5923 11/06 – Additional Coverage Endorsement

This form replaces Form 5662 10/01 – same title, to make editorial changes and to add Personal Injury Coverage at no additional charge. Please see the enclosed exhibit for the changes. This form is used with our mobile home policy that includes both property and liability coverages.

Form 5975 05/04 – Additional Coverage Endorsement

This form replaces Form 5663 10/01 – same title, to make editorial changes pursuant to the exhibit enclosed. This form is used with our mobile home policy that includes property coverage only.

Form 6005 04/04 – Central Alarm Discount

This is a new endorsement which provides a discount for insureds who maintain an alarm system which will alert a fire department or central dispatcher in case of fire or burglary.

We will reduce the premium by \$20 when this form is provided.

REPLACEMENT OF TABLE OF CONTENTS AND FORMS

Please withdraw:

Table of Contents – Revised Printing 5/05
Form 5619 02/98 – Replacement Cost Personal Property
Form 5662 10/01 – Additional Coverage Endorsement
Form 5663 10/01 – Additional Coverage Endorsement

Please insert:

Table of Contents – Revised Printing 12/07
Form 5640 06/99 – Replacement Cost Personal Property
Form 5923 11/06 – Additional Coverage Endorsement
Form 5975 05/04 – Additional Coverage Endorsement
Form 6005 04/04 – Central Alarm Discount

**Foremost[®] Property and
Casualty Insurance Company**

ARKANSAS

MOBILE HOME INSURANCE PROGRAM

TABLE OF CONTENTS

SECTION	PAGE NUMBER
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* Mobile Home Insurance Program Rules	1, 2 and E-1
RATES	
Mobile Home Insurance Program Rates	R-1 thru R-13
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Loss Payable	2985 09/96
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Additional Insured - Nonresident	3054 11/96
Loss Assessment Coverage	3055 11/96
Earthquake	3057 02/97
Scheduled Personal Property List	3411 02/96
Unrelated Named Insured	3421 02/96
Required Change - Arkansas	3557 09/01
Mobile Home Insurance Policy (Includes both Property and Liability Coverages)	3826 03/97
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Identity Theft Expense Coverage	5095 03/05
* Replacement Cost Personal Property	5640 06/99
Coverage C - Personal Property Increase in Special Amount of Insurance for Tools	5717 05/98
* Additional Coverage Endorsement	5923 11/06
* Additional Coverage Endorsement	5975 05/04
* Central Alarm Discount	6005 04/04
Excess Dwelling Coverage	6933 07/98
Excess Dwelling Coverage (Except for Non-Structural Hail Losses)	6934 07/98
Mobile Home Declarations Page	82000 03/97

REPLACEMENT COST PERSONAL PROPERTY

5640 06/99

SECTION I - Our Payment Methods

Our Payment Methods for Coverage C - Personal Property are changed to read:

Coverage C - Personal Property

Replacement Cost Payment Method

We will pay no more than the lowest of:

1. **Replacement cost** of your Personal Property.
2. The amount required to repair your Personal Property at the time of loss.
3. The Amount of Insurance shown on the Declarations Page that applies to your Personal Property.
4. Any applicable Special Amounts of Insurance on Certain Property.

This Replacement Cost Payment Method does not apply to:

- i. Antiques, fine arts, paintings and similar articles of rarity or antiquity which cannot be replaced.
- ii. Memorabilia, souvenirs, trading cards, collectors items and similar articles whose age or history contribute to their value.
- iii. Articles not maintained in good or workable condition.
- iv. Articles that are outdated or obsolete and are stored or not being used.
- v. Scheduled Personal Property Coverage.

Insured losses for the above listed items will be settled on an Actual Cash Value Payment Method.

If the **replacement cost** for the damaged property is more than \$2,500, we will pay no more than the actual cash value of that damage until actual repair or replacement is completed.

The damage to your property will reduce the Amount of Insurance available during the policy period by the amount of the damage. Your coverage will return to the Amount of Insurance shown on the Declarations Page upon completion of the repairs or replacements.

Actual Cash Value Payment Method

You may disregard the Replacement Cost Payment Method and make a claim on an Actual Cash Value Payment Method. If you do, you may make further claim within 180 days after the loss for any additional cost you incur in replacing the damaged property. If you do elect to make a claim on an Actual Cash Value Payment Method, then the amount we pay for loss to your property will be the lowest of:

1. **Actual cash value** of your Personal Property at the time of the loss.
2. The amount required to repair or replace your Personal Property.
3. The Amount of Insurance shown on the Declarations Page for your Personal Property.

The damage to your property will reduce the Amount of Insurance available during the policy period by the amount of the damage. Your coverage will return to the Amount of Insurance shown on the Declarations Page upon completion of the repairs or replacements.

Replacement Cost means the cost to repair or replace property, without deduction for depreciation, with new property of like kind and quality.

5640 06/99

All other provisions of your policy apply.

ADDITIONAL COVERAGE ENDORSEMENT
5923 11/06

Definitions

The following definition is added:

Personal injury means injury arising out of one or more of the following offenses:

1. false arrest, detention or imprisonment;
2. malicious prosecution; or
3. libel, slander or defamation of character.

SECTION I - Your Property Coverages

Coverage C - Personal Property

Special Amounts of Insurance

The Special Amounts of Insurance for the following Personal Property Groups are increased to:

3. \$500 Personal property primarily used or intended for **business** purposes while away from your **premises**.
4. \$1,500 Securities, accounts, deeds, evidence of debt, letters of credit, notes other than bank notes, manuscripts, passports, personal records, tickets and stamps.

This Special Amount of Insurance includes all costs to research, restore or replace the information and the medium upon which it was recorded.

5. \$1,500 Watercraft, including their trailers, furnishings, accessories, equipment and engines or motors.
6. \$1,500 Trailers, other than watercraft trailers.

SECTION I - Your Property Coverages

Your Additional Coverages

The following coverages are added:

8. **Loss Assessment.** We will pay the actual, reasonable and necessary cost for your share of any loss assessment charged against all members of an association of property owners if the assessment is made as a result of direct loss to the property collectively owned by all members, caused by an Insured Peril.

This coverage applies only to assessments made against you as the owner of your **premises** for losses that occur during the Policy Period shown on the Declarations Page.

We will pay up to \$1,000 with respect to any one loss regardless of the number of assessments made.

No deductible will apply.

9. **Ordinance or Law.** We will pay the actual, reasonable and necessary costs, up to 10% of the Amount of Insurance shown on the Declarations Page

for Coverage A - Dwelling, for the increased costs caused by the enforcement of any governmental requirement regulating the construction, remodeling, renovation, repair or demolition of that part of your dwelling damaged by an Insured Peril;

We will not pay:

- a. the costs to comply with any ordinance or law which requires any of you or others to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize **pollutants**;
- b. for the loss in value to your dwelling due to the requirements of any ordinance or law; or
- c. the cost to repair, replace, rebuild, stabilize or restore land.

This additional coverage does not change the Amount of Insurance that applies to Coverage A - Dwelling, shown on the Declarations Page.

10. **Locksmith Coverage.** We will pay the actual, reasonable and necessary cost, up to \$500, for locksmith services required because of a loss or theft of any of your house keys.

No deductible will apply.

SECTION I - Your Property Coverages

SECTION I - Deductible

Section I - Deductible is changed to read:

Any loss to insured property will be subject to the deductible shown on the Declarations Page or elsewhere in this policy unless stated otherwise.

If your insured loss, other than loss caused by earthquake or hurricane, exceeds \$5,000 the deductible will be waived.

SECTION I - Exclusions

Coverage A - Dwelling

Coverage B - Other Structures

Coverage C - Personal Property

Exclusion 4. is changed to read:

4. loss caused by enforcement of any governmental requirement regulating:
 - a. Sale;
 - b. Confiscation;
 - c. Seizure;
 - d. Occupancy; or
 - e. Relocation of your dwelling or other structures.

This exclusion does not apply to the insurance that may be provided for in **Your Additional Coverages, 9. Ordinance and Law.**

SECTION II - Your Liability Coverages

Coverage E - Personal Liability is changed to read:

If a claim is made or a suit brought against you for damages because of **bodily injury** or **property damage**, caused by an accident to which this coverage applies, or if a claim is made or a suit brought against you for damages because of **personal injury**, caused by an offense to which this coverage applies, we will:

1. Pay up to the Limit of Liability shown on the Declarations Page for the damages for which you are legally liable.
2. Provide a defense at our expense by attorneys of our choice.

We may make any investigations and settle any claims or suits that we decide appropriate. Our obligation to defend any claim or suit ends when the amount we pay in settlement or judgment for damages resulting from the accident or offense equals the Limit of Liability shown on the Declarations Page. This insurance applies only to **bodily injury** and **property damage** that occurs during the Policy Period and to **personal injury** only if the offense occurs during the Policy Period.

SECTION II - Your Additional Coverages

The following coverage is added:

Loss Assessment Coverage

We will pay for your liability arising out of any loss assessment charged against you as a member of an association of property owners for compensatory damages arising out of **bodily injury** or **property damage** caused by an accident that occurs during the policy period shown on the Declarations Page.

This coverage applies only to loss assessments charged against you as owner or tenant of your dwelling where you reside that is described on the Declarations Page.

We will pay up to \$1,000 with respect to any one accident, regardless of the number of assessments made.

No deductible will apply.

SECTION II Exclusions

Coverage E - Personal Liability

Coverage F - Medical Payments to Others

The following exclusion is deleted :

11. Arising out of liability for your share of any loss for an assessment charged against all members of an association, corporation or community of tenants or property owners.

Coverage E - Personal Liability

The following exclusions are added to Coverage E - Personal Liability.

We will not pay for **personal injury**:

1. Arising out of liability assumed by any of you in any contract or agreement whether before or after the offense occurs.
2. Caused by a violation of a penal law or ordinance committed by or with the knowledge or consent of any of you.
3. Sustained by any person as a result of an offense directly or indirectly related to the employment of this person by any of you.
4. Arising out of any of your **business** regardless of whether it is a **business** that is owned or operated by any of you or employs any of you.
5. Arising out of civic or public activities performed for pay by any of you.
6. To any of you.

ADDITIONAL COVERAGE ENDORSEMENT
5975 05/04

SECTION I - Your Property Coverages

Coverage C - Personal Property

Special Amounts of Insurance

The Special Amounts of Insurance for the following Personal Property Groups are increased to:

3. \$500 Personal property primarily used or intended for **business** purposes while away from your **premises**.
4. \$1,500 Securities, accounts, deeds, evidence of debt, letters of credit, notes other than bank notes, manuscripts, passports, personal records, tickets and stamps.

This Special Amount of Insurance includes all costs to research, restore or replace the information and the medium upon which it was recorded.

5. \$1,500 Watercraft, including their trailers, furnishings, accessories, equipment and engines or motors.
6. \$1,500 Trailers, other than watercraft trailers.

SECTION I - Your Property Coverages

Your Additional Coverages

The following coverages are added:

8. **Loss Assessment.** We will pay the actual, reasonable and necessary cost for your share of any loss assessment charged against all members of an association of property owners if the assessment is made as a result of direct loss to the property collectively owned by all members, caused by an Insured Peril.

This coverage applies only to assessments made against you as the owner of your **premises** for losses that occur during the Policy Period shown on the Declarations Page.

We will pay up to \$1,000 with respect to any one loss or accident, regardless of the number of assessments made.

No deductible will apply.

9. **Ordinance or Law.** We will pay the actual, reasonable and necessary costs, up to 10% of the Amount of Insurance shown on the Declarations Page for Coverage A - Dwelling, for the increased costs caused by the enforcement of any governmental requirement regulating the construction, remodeling, renovation, repair or demolition of that part of your dwelling damaged by an Insured Peril;

We will not pay:

- a. the costs to comply with any ordinance or law which requires any of you or others to test for, monitor, clean up, remove, contain, treat, detoxify or neutralize **pollutants**;
- b. for the loss in value to your dwelling due to the requirements of any ordinance or law; or
- c. the cost to repair, replace, rebuild, stabilize or restore land.

This additional coverage does not change the Amount of Insurance that applies to Coverage A - Dwelling, shown on the Declarations Page.

10. **Locksmith Coverage.** We will pay the actual, reasonable and necessary cost up to \$500, for locksmith services required because of a loss or theft of any of your house keys.

No deductible will apply.

SECTION I - Your Property Coverages

SECTION I - Deductible

Section I - Deductible is changed to read:

Any loss to insured property will be subject to the deductible shown on the Declarations Page or elsewhere in this policy unless stated otherwise.

If your insured loss, other than loss caused by earthquake or hurricane exceeds \$5,000 the deductible will be waived.

SECTION I - Exclusions

Coverage A - Dwelling

Coverage B - Other Structures

Coverage C - Personal Property

Exclusion 4. is changed to read:

4. loss caused by enforcement of any governmental requirement regulating:
 - a. Sale;
 - b. Confiscation;
 - c. Seizure;
 - d. Occupancy; or
 - e. Relocation of your dwelling or other structures.

This exclusion does not apply to the insurance that may be provided for in **Your Additional Coverages,**

9. Ordinance and Law.

CENTRAL ALARM DISCOUNT

6005 04/04

Your premium has been reduced based on your representation that your dwelling is equipped with an alarm system which will alert a fire department or central dispatcher in case of fire or burglary.

You agree to maintain the alarm and let us know if you change or cancel your alarm system service.

If your dwelling is burglarized or damaged by fire and it is not protected by a central fire or burglary alarm, your deductible will be increased by an additional \$100.

6005 04/04

All other provisions of your policy apply.