

SERFF Tracking Number: ZURC-125842390 State: Arkansas
First Filing Company: American Zurich Insurance Company, ... State Tracking Number: EFT \$50
Company Tracking Number: CW-GL-27798
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
Product Name: CW-GL-27798 Coverage Extension Endorsement - U-GL-1029-D CW for Use with the ISO Commercial General Liability Coverage
Part
Project Name/Number: CW-GL-27798 Coverage Extension Endorsement - U-GL-1029-D CW for Use with the ISO Commercial General Liability Coverage
Part/CW-GL-27798

Filing at a Glance

Companies: American Zurich Insurance Company, American Guarantee and Liability Insurance Company, Colonial American Casualty & Surety Company, Fidelity and Deposit Company of Maryland, Zurich American Insurance Company of Illinois, Zurich American Insurance Company

Product Name: CW-GL-27798 Coverage Extension Endorsement - U-GL-1029-D CW for Use with the ISO Commercial General Liability Coverage Part
SERFF Tr Num: ZURC-125842390 State: Arkansas

TOI: 17.0 Other Liability - Claims Made/Occurrence
SERFF Status: Closed State Tr Num: EFT \$50

Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: CW-GL-27798
State Status: Fees verified and received

Filing Type: Form
Co Status: Not Applicable
Reviewer(s): Betty Montesi, Edith Roberts

Author: Cindy Schultz
Date Submitted: 10/02/2008
Disposition Date: 10/14/2008
Disposition Status: Approved

Effective Date Requested (New): 12/01/2008
Effective Date Requested (Renewal): 12/01/2008
Effective Date (New):
Effective Date (Renewal):

State Filing Description:

General Information

Project Name: CW-GL-27798 Coverage Extension Endorsement - U-GL-1029-D CW for Use with the ISO Commercial General Liability Coverage Part
Status of Filing in Domicile:

Project Number: CW-GL-27798
Domicile Status Comments:

Reference Organization:
Reference Number:

Reference Title:
Advisory Org. Circular:

Filing Status Changed: 10/14/2008

State Status Changed: 10/14/2008

Deemer Date:

Corresponding Filing Tracking Number:

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Filing Description:

The purpose of this filing is to replace our U-GL-1029-A CW with revised version U-GL-1029-D CW so that it tracks properly with the recent ISO 2007 changes made to the Commercial General Liability Coverage Part.

This revised form is an optional form which will be used with our Commercial General Liability Coverage Form CG 00 01 and CG 00 02.

No substantive changes have been made to this form.

Attached is a redlined version showing the changes made to the previously filed and approved form.

We request an effective date of December 1, 2008, for new and renewal business.

Company and Contact

Filing Contact Information

Cindy Schultz, Filing Analyst cindy.schultz@zurichna.com
 1400 American Lane (847) 762-7311 [Phone]
 Schaumburg, IL 60196 (847) 605-7768[FAX]

Filing Company Information

American Zurich Insurance Company	CoCode: 40142	State of Domicile: Illinois
1400 American Lane	Group Code: 212	Company Type:
Schaumburg, IL 60196	Group Name:	State ID Number:
(847) 605-6000 ext. [Phone]	FEIN Number: 36-3141762	

American Guarantee and Liability Insurance Company	CoCode: 26247	State of Domicile: New York
1400 American Lane	Group Code: 212	Company Type:
Schaumburg, IL 60196	Group Name:	State ID Number:
(847) 605-6000 ext. [Phone]	FEIN Number: 36-6071400	

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Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Zurich Insurance Company	\$50.00	10/02/2008	22884896
American Guarantee and Liability Insurance Company	\$0.00	10/02/2008	
Colonial American Casualty & Surety Company	\$0.00	10/02/2008	
Fidelity and Deposit Company of Maryland	\$0.00	10/02/2008	
Zurich American Insurance Company of Illinois	\$0.00	10/02/2008	
Zurich American Insurance Company	\$0.00	10/02/2008	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Edith Roberts	10/14/2008	10/14/2008

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Disposition

Disposition Date: 10/14/2008

Effective Date (New):

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Redline	Approved	Yes
Form	Coverage Extension Endorsement	Approved	Yes

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Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	Coverage Extension Endorsement	U-GL-1029-D CW	09 08	Endorsement/Amendment/Conditions Replaced	Replaced Form #:0.00 U-GL-1029-D CW (12/03) Previous Filing #:		U-GL-1029-D CW 0908 Cov Ext End-Draft05-Legal approved.pdf



Coverage Extension Endorsement

Policy No.	Eff. Date of Pol.	Exp. Date of Pol.	Eff. Date of End.	Producer	Add'l. Prem	Return Prem.
					\$	\$

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the:

Commercial General Liability Coverage Part

The following changes apply to the policy:

1. Amended Exclusion – Expected or Intended Injury

Exclusion a., **Expected or Intended Injury** of Paragraph 2., **Exclusions** under **Section I - Coverage A – Bodily Injury And Property Damage Liability** is replaced by the following:

a. Expected or Intended Injury

“Bodily injury or “property damage” expected or intended from the standpoint of the insured. This exclusion does not apply to “bodily injury” or “property damage” resulting from the use of reasonable force to protect persons or property.

2. Non-owned Watercraft Amendment

Paragraph (2)(a) of exclusion 2.g., **Aircraft, Auto Or Watercraft** under **Section I - Coverage A – Bodily Injury And Property Damage Liability** is replaced by the following:

(2) A watercraft you do not own that is:

(a) Less than 51 feet long; and

3. Amendment of Fire Damage Legal Liability Coverage

A. The word Fire is replaced by “specific perils” where it appears in:

1. Exclusion 2.j., **Damage To Property** of **Section I – Coverage A – Bodily Injury And Property Damage Liability**;
2. Paragraph 6. of **Section III – Limits of Insurance**; and
3. Paragraph 9.a. of the “Insured Contract” definition under **Section V - Definitions**.

B. The last paragraph of **Section I – Coverage A – Bodily Injury And Property Damage Liability, 2. Exclusions** is replaced by the following:

Exclusions c. through n. do not apply to damage by “specific perils” to premises rented to you or temporarily occupied by you with permission of the owner. A separate limit of insurance applies to this coverage as described in **Section III - Limits of Insurance**. This limit will apply to all damages proximately caused by the same event, whether such damage results from one or more of these perils.

C. The following additional definitions are added to **Section V - Definitions**:

“Specific perils” means:

Fire, lightning, windstorm or hail, smoke or riot or civil commotion.

4. Amendment – Supplementary Payments

Paragraph **1.b.** of **Section I – Supplementary Payments – Coverages A and B** is replaced by the following:

- b.** Up to \$2500 for the cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.

5. Broad Named Insured Amendment

Paragraph **3.** of **Section II – Who is an Insured** and the last paragraph under **Section II – Who is an Insured** are replaced by the following:

- 3.** Any organization you newly acquire or form during the policy period and over which you maintain an ownership interest of more than 50% of such organization, will qualify as a Named Insured if there is no other similar insurance available to that organization. However,
 - a.** Coverage under this provision is afforded only until the end of the policy period if the organization is not reported to us during the policy period in which the organization is acquired or formed;
 - b.** Coverage **A** does not apply to “bodily injury” or “property damage” that occurred before you acquired or formed the organization;
 - c.** Coverage **B** does not apply to “personal and advertising injury” arising out of an offense committed before you acquired or formed the organization; and
 - d.** If the organization is a joint venture or partnership, coverage is afforded only to the extent of the Named Insured’s percentage of ownership interest in the organization.

6. Redefined Bodily Injury

Definition **3.**, “Bodily injury” of **Section V - Definitions** is replaced by the following:

- 3.** “Bodily injury” means bodily injury, sickness or disease sustained by a person. This includes mental anguish, mental injury, shock, fright or death resulting from the “bodily injury”.

7. Amendment of Representations Condition

The following is added to Condition **6.**, **Representations** of **Section IV – Commercial General Liability Conditions**:

Coverage will continue to apply if you:

- 1.** Unintentionally fail to disclose all hazards existing at the inception of this policy; or
- 2.** Unintentionally make an error, omission, or improper description of premises or other statement of information stated in this policy.

You must notify us as soon as possible after the discovery of any hazards or any other information that was not provided to us prior to the acceptance of this policy.

8. Notice of Error In Claim Reporting

The following is added to Condition **2.**, **Duties In The Event Of Occurrence, Offense, Claim or Suit** of **Section IV – Commercial General Liability Conditions**:

In the event that an insured reports an “occurrence” to the workers compensation carrier of the Named Insured and this “occurrence” later develops into a general liability claim covered by this policy, the insured’s failure to report such “occurrence” to us at the time of the “occurrence” shall not be deemed to be a violation of this Condition. You must, however, give us notice as soon as practicable after being made aware that the particular claim is a general liability rather than a workers compensation claim.

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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name: Uniform Transmittal Document-
Property & Casualty **Review Status:** Approved 10/14/2008

Comments:

Attachments:

NAIC TRANSMITAL.pdf
Form Filing Schedule.pdf

Satisfied -Name: Redline **Review Status:** Approved 10/14/2008

Comments:

Attachment:

Redlined C to D.pdf

Property & Casualty Transmittal Document

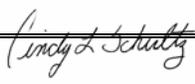
1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only
	a. Date the filing is received:
	b. Analyst:
	c. Disposition:
	d. Date of disposition of the filing:
	e. Effective date of filing:
	New Business
	Renewal Business
	f. State Filing #:
	g. SERFF Filing #:
	h. Subject Codes

3. Group Name	Group NAIC #
Zurich North America	212

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Zurich American Insurance Company	NY	16535	36-4233459	
American Guarantee and Liability Insurance Company	NY	26247	36-6071400	
American Zurich Insurance Company	IL	40142	36-3141762	
Colonial American Casualty and Surety Company	MD	34347	52-1096670	
Fidelity and Deposit Company of Maryland	MD	39306	13-3046577	
Zurich American Insurance Insurance Co of IL	IL	27855	36-2781080	

5. Company Tracking Number	CW-GL-27798
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Cindy Schultz 1400 American Lane Schaumburg, IL 60196-1056	Filing Analyst	847-762-7311	847-605-7768	Cindy.schultz@zurichna.com
7.	Signature of authorized filer				
8.	Please print name of authorized filer		Cindy L Schultz		

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

9. Type of Insurance (TOI)	17.00 Other Liability-Occ/Claims Made
10. Sub-Type of Insurance (Sub-TOI)	17.0001 Commercial General Liability
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Commercial General Liability
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: 12/01/2008	Renewal: 12/01/2008
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
16. Reference Organization (if applicable)		
17. Reference Organization # & Title		
18. Company's Date of Filing	10/02/2008	
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved	

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #	CW-GL-27798
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21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

The purpose of this filing is to replace our U-GL-1029-A CW with revised version U-GL-1029-D CW so that it tracks properly with the recent ISO 2007 changes made to the Commercial General Liability Coverage Part.

This revised form is an optional form which will be used with our Commercial General Liability Coverage Form CG 00 01 and CG 00 02.

No substantive changes have been made to this form.

Attached is a redlined version showing the changes made to the previously filed and approved form.

We request an effective date of December 1, 2008, for new and renewal business.

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 #:

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 #		CW-GL-27798		
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)				
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	Coverage Extension Endorsement	U-GL-1029-DCW (09/08)	<input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	U-GL-1029-C CW (12/03)	
02			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
03			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
04			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
05			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
06			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
07			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
08			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
09			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
10			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		

Coverage Extension Endorsement



Policy No.	Eff. Date of Pol.	Exp. Date of Pol.	Eff. Date of End.	Producer	Add'l. Prem	Return Prem.
					\$	\$

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the:

Commercial General Liability Coverage Part

The following changes apply to the policy:

1. Amended Exclusion – Expected or Intended Injury

Exclusion **a. Expected or Intended Injury of Paragraph 2. Exclusions under Section I - Coverage A – Bodily Injury And Property Damage Liability** is replaced by the following:

a. Expected or Intended Injury

“Bodily injury or “property damage” expected or intended from the standpoint of the insured. This exclusion does not apply to “bodily injury” or “property damage” resulting from the use of reasonable force to protect persons or property.

2. Non-owned Watercraft Amendment

Paragraph (2)(a) of exclusion **2.g. Aircraft, Auto Or Watercraft** under **Section I - Coverage A – Bodily Injury And Property Damage Liability** is replaced by the following:

(2) A watercraft you do not own that is:

(a) Less than 51 feet long; and

3. Amendment of Fire Damage Legal Liability Coverage

A. The word Fire is replaced by “specific perils” where it appears in:

1. Exclusion 2.j. Damage To Property of Section I – Coverage A – Bodily Injury And Property Damage Liability;

2. Paragraph 6. of Section III – Limits of Insurance; and

3. Paragraph 9.a. of the “Insured Contract” definition under Section V - Definitions.

B. The last paragraph of **Section I – Coverage A – Bodily Injury And Property Damage Liability, 2. Exclusions** is replaced by the following:

Exclusions **c. through n.** do not apply to damage by “specific perils” to premises rented to you or temporarily occupied by you with permission of the owner. A separate **limit of insurance** applies to this coverage as described in **Section III - Limits of Insurance**. This limit will apply to all damages proximately caused by the same event, whether such damage results from one or more of these perils.

C. The following additional definitions are added to **Section V - Definitions**:

“Specific perils” means:

Fire, lightning, windstorm or hail, smoke or riot or civil commotion.

4. Amendment – Supplementary Payments

- Deleted:
- Deleted: SECTION I. COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE LIABILITY, Item 2.
- Deleted: .
- Deleted: is amended to read as follows
- Deleted: .
- Deleted:
- Deleted: .
- Deleted: 2. Exclusions of SECTION
- Deleted: . COVERAGE
- Deleted: ., BODILY INJURY AND PROPERTY DAMAGE LIABILITY
- Deleted: deleted and
- Deleted:
- Deleted:
- Deleted: changed to
- Deleted: The
- Deleted: section
- Deleted: Declarations page of this policy;# (... [1])
- Deleted: of
- Deleted: COVERAGE A. SECT (... [2])
- Deleted: .
- Deleted: Limit of Insurance
- Deleted: Limits of Insurance SECTION
- Deleted:
- Deleted: <#>This endorsement (... [3])
- Deleted:
- Deleted:
- Deleted: .
- Deleted: ISO Properties
- Deleted: .
- Deleted: Copyright, ISO Prog (... [4])
- Deleted: C
- Deleted: 12/03

Paragraph 1.b. of Section I – Supplementary Payments – Coverages A and B is replaced by the following:

b. Up to \$2500 for the cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.

5. Broad Named Insured Amendment

Paragraph 3. of Section II – Who is an Insured and the last paragraph under Section II – Who is an Insured are replaced by the following:

3. Any organization you newly acquire or form during the policy period and over which you maintain an ownership interest of more than 50% of such organization, will qualify as a Named Insured if there is no other similar insurance available to that organization. However,

a. Coverage under this provision is afforded only until the end of the policy period if the organization is not reported to us during the policy period in which the organization is acquired or formed,

b. Coverage **A** does not apply to “bodily injury” or “property damage” that occurred before you acquired or formed the organization;

c. Coverage **B** does not apply to “personal and advertising injury” arising out of an offense committed before you acquired or formed the organization; and

d. If the organization is a joint venture or partnership, coverage is afforded only to the extent of the Named Insured’s percentage of ownership interest in the organization.

6. Redefined Bodily Injury

Definition 3. “Bodily injury” of Section V- Definitions is replaced by the following:

3. “Bodily injury” means bodily injury, sickness or disease sustained by a person. This includes mental anguish, mental injury, shock, fright or death resulting from the “bodily injury”.

7. Amendment of Representations Condition

The following is added to Condition 6. Representations of Section IV – Commercial General Liability Conditions:

Coverage will continue to apply if you:

1. Unintentionally fail to disclose all hazards existing at the inception of this policy; or
2. Unintentionally make an error, omission, or improper description of premises or other statement of information stated in this policy.

You must notify us as soon as possible after the discovery of any hazards or any other information that was not provided to us prior to the acceptance of this policy.

8. Notice of Error In Claim Reporting

The following is added to Condition 2. Duties In The Event Of Occurrence, Offense, Claim or Suit of Section IV – Commercial General Liability Conditions:

In the event that an insured reports an “occurrence” to the workers compensation carrier of the Named Insured and this “occurrence” later develops into a general liability claim covered by this policy, the insured’s failure to report such “occurrence” to us at the time of the “occurrence” shall not be deemed to be a violation of this Condition. You must, however, give us notice as soon as practicable after being made aware that the particular claim is a general liability rather than a workers compensation claim.

- Deleted: . SECTION
- Deleted: . SUPPLEMENTARY PAYMENTS - COVERAGES
- Deleted: AND
- Deleted: paragraph 1.b.
- Deleted: amended to read as follows
- Deleted: Subsection 4.
- Deleted: SECTION
- Deleted: Is An
- Deleted: is deleted and
- Deleted:
- Deleted:
- Deleted:

- Deleted: .
- Deleted: .
- Deleted: in SECTION
- Deleted: .
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- Deleted: ”
- Deleted: the
- Deleted: Condition

- Deleted: .
- Deleted: General Liability
- Deleted: ,
- Deleted:
- Deleted: the Duties
- Deleted: General Liability
- Deleted: Workers Compensation

- Deleted: C
- Deleted: 12/03)