

# 540A. POLICY CHANGE

This endorsement forms a part of Policy No. \_\_\_\_\_ issued to \_\_\_\_\_  
 by the \_\_\_\_\_ at its Agency  
 (Name of Insurance Company)  
 located (city and state) \_\_\_\_\_ and is effective from \_\_\_\_\_  
 (12:01 A.M. Standard Time)

**(The information above is required only when this endorsement is issued subsequent to preparation of the policy.)**

This endorsement forms a part of the policy to which attached, effective from its date of issue unless otherwise stated herein.

The declarations or schedules of the policy or any endorsements are amended with respect to any of the following items marked with an X.

<input type="checkbox"/> ITEM 1.		<input type="checkbox"/> NAME	<input type="checkbox"/> ADDRESS OF INSURED	<input type="checkbox"/> POLICY PERIOD	IS CORRECTED TO READ:		
		<input type="checkbox"/> PLACE OF GARAGING AUTO CHANGED TO READ (IF DIFFERENT FROM ADDRESS)					
<input type="checkbox"/> ITEM 2.		THE COVERAGES INDICATED IN THE SCHEDULE OF THIS ENDORSEMENT SHALL APPLY TO THE FOLLOWING DESCRIBED					
a. AUTO ADDED AUTO.							
AUTO NO.	MODEL YEAR	TRADE NAME AND BODY TYPE	VIN/IDENTIFICATION NUMBER	PURCHASED MO YR N/U	COST	SYMBOL AND AGE	CLASS RATE
NAME AND ADDRESS							
(ENDORSEMENT APPLICABLE)							
b. AUTO ELIMINATED OR		THE INSURANCE AFFORDED BY THE POLICY SHALL CEASE TO COVER AUTO #					
MODEL YEAR	CLASS RATE	TRADE NAME	MOTOR NUMBER, SERIAL NUMBER OR IDENTIFICATION NUMBER				
ITEM 3.		<input type="checkbox"/> CLASS RATE CHANGED TO	AUTO #	AUTO #	AUTO #		
<input type="checkbox"/> OTHER CHANGES		_____					

**SCHEDULE**

COVERAGES	LIMITS OF LIABILITY	PREMIUMS—AUTO #			PREMIUMS AUTO		
		ANNUAL	ADDITIONAL	RETURN	ANNUAL	ADDITIONAL	RETURN
BODILY INJURY LIABILITY	\$ .000 EACH PERSON \$ .000 EACH ACCIDENT	\$	\$	\$	\$	\$	\$
PROPERTY DAMAGE LIABILITY	\$ .000 EACH ACCIDENT						
COMBINED BODILY INJURY & PROPERTY DAMAGE LIABILITY	\$ .000 EACH ACCIDENT						
MEDICAL PAYMENTS	\$ .000 EACH PERSON						
PERSONAL INJURY PROTECTION	\$ .000 EACH PERSON						
UNINSURED/UNDERINSURED MOTORIST COVERAGE							
BODILY INJURY LIABILITY	\$ .000 EACH PERSON \$ .000 EACH ACCIDENT						
* PROPERTY DAMAGE LIABILITY	\$ .000 EACH ACCIDENT						
COMBINED INJURY & * PROPERTY DAMAGE LIABILITY	\$ .000 EACH ACCIDENT						
OTHER THAN COLLISION	ACTUAL CASH VALUE LESS \$ DED						
	\$ LESS \$ DED						
COLLISION	ACTUAL CASH VALUE LESS \$ DED						
	\$ LESS \$ DED						
TOWING AND LABOR COSTS	\$ PER DISABLEMENT						
SUBTOTAL							
* \$250 DEDUCTIBLE APPLIES TO UM/UIM P.D.							
ENDORSEMENTS ATTACHED							
TOTAL		\$	ADDITIONAL PREMIUM		\$	RETURN PREMIUM	