



# Automobile Policy Endorsement

**Policy Number:**

## Extended Non-Owned Automobile Coverage (Named Insured or Relative)

**Effective Date:**

The Policy Number and Effective Date need be completed only when this endorsement is issued subsequent to preparation of the policy.

The insurance provided by this endorsement applies only to those coverages for which a premium charge is shown in the declarations.

**Name of Insured**

### SECTION I - LIABILITY COVERAGES

#### DEFINITIONS

In Section I of this endorsement "**insured**" means:

1. the person(s) named in the schedule above. It includes a spouse if a resident of the same household; and
2. any other person or organization not owning the auto or **trailer** for his or its liability for acts or omissions of an **insured**.

#### LOSSES WE WILL PAY FOR YOU

We agree that:

The insurance provided for a **non-owned auto** by Section I of the policy also applies to any auto or **trailer** used or maintained by the **insured**. This agreement is subject to the following provisions:

1. The endorsement applies to a person(s) defined as an **insured**.
2. The first sentence of exclusion 2 of Section I of the policy is changed to read:  
  
Section I does not apply to any vehicle while being used to carry passengers or goods for hire.
3. Exclusion 9. of Section I is changed to read:  
  
9. We do not cover any auto maintained or used by a person while he is employed or otherwise engaged in any **auto business** or any other business of the **insured**.

We do cover an auto, including an attached **trailer** operated or **occupied** by an **insured**, his chauffeur or domestic servant.

4. There is no coverage for any auto or **trailer** owned by the **insured** or a member of his household. This exclusion does not apply to an auto or **trailer** owned by the **insured's** private chauffeur or domestic servant.

### SECTION II - AUTO MEDICAL PAYMENTS

#### DEFINITIONS

The definition of "**insured**" in Section I of this endorsement applies to Section II.

#### PAYMENTS WE WILL MAKE

We agree that the insurance provided by Section II of the policy applies for **bodily injury** sustained:

1. by **you** or a **relative** while **occupying** an auto furnished for the regular use of an **insured**; and
2. by an **insured** while **occupying** an auto furnished for **your** or **your relatives** regular use;
3. by any person **occupying** an auto or **trailer** operated or **occupied** by an **insured** or operated on his behalf by his private chauffeur or domestic servant.

#### EXCLUSIONS

The following exclusions are added:

1. There is no coverage for **bodily injury** to any person:

- a. while **occupying** an auto used to transport persons or goods for hire; or
  - b. resulting from his maintenance or use of any auto or **trailer** in any other business or occupation. He is covered for **bodily injury** resulting from the operation or occupancy of an auto or **trailer** by the **insured** or by his private chauffeur or domestic servant.
2. There is no coverage for any auto or **trailer** owned by the **insured** or a member of his household. This exclusion does apply to an auto or **trailer** owned by

the **insured's** private chauffeur or domestic servant.

#### **SECTION IV - UNINSURED MOTORISTS AND UNDERINSURED MOTORISTS COVERAGES**

We agree that:

If Uninsured Motorists or Underinsured Motorists Coverage is provided under the policy, the definition of **insured auto** includes a **non-owned auto** furnished for **your** regular use. It includes use by **your** spouse if a resident of **your** household.

This endorsement forms a part of **your** policy. It is effective at 12:01 A.M. local time at **your** address on the effective date shown above.