



**OREGON MUTUAL INSURANCE COMPANY  
ADDITIONAL INSURED – OREGON  
PRIVATE RESIDENCE OCCUPANCY  
(INCLUDES RESTRICTIONS OR ABRIDGMENTS)**

DF-476 (10-00)

Name and Address of Person or Organization:

Interest:

Location of Premises:

SAMPLE

1. The definition of **insured** includes the person or organization named above as the interest appears with respect to:
  - Coverage A – Residence
  - Coverage B – Related Private Structures
  - Coverage L – Personal Liability
  - Coverage M – Medical Payments to Others
2. **Coverage L - Personal Liability** and **Coverage M - Medical Payments to Others** apply only with respect to the premises described above.
3. This coverage does not apply to **bodily injury** to any employee arising out of or in the course of employment by the person or organization named above.

All other terms and conditions of the policy to which this endorsement is attached remain unchanged except as herein specifically provided.

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(This Attaching Clause need be completed only when this endorsement is issued subsequent to preparation of the policy.)

Attached to and forming a part of Policy No.

of the OREGON MUTUAL INSURANCE COMPANY, of McMinnville, Oregon.

Issued to:

Effective Date: