

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**ADDITIONAL RESIDENCE RENTED TO OTHERS**

This endorsement modifies insurance provided under the following:

FARM LIABILITY COVERAGE FORM

<b>SCHEDULE*</b>	
<b>Description of Residence:</b>	
<b>Location of Residence:</b>	
<b>Number of Families:</b>	
<b>Description of Residence:</b>	<b>SAMPLE</b>
<b>Location of Residence:</b>	
<b>Number of Families:</b>	
<b>Description of Residence:</b>	
<b>Location of Residence:</b>	
<b>Number of Families:</b>	

\* Information required to complete this Schedule, if not shown on this endorsement, will be shown in the Declarations.

- A.** For the purpose of Coverage **H** – Bodily Injury And Property Damage Liability, and Coverage **J** – Medical Payments, the residence(s) listed in the Schedule is included in the meaning of "insured location".
- B.** Exclusion **2.I.(2)** of Coverage **H (Section I)** does not apply with respect to the residence(s) listed in the Schedule.