

Policy Number: XXXXX-XX-XX

THIS ENDORSEMENT CHANGES THE POLICY, PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS POLICY

SCHEDULE

Name Of Person Or Organization: CITY OF BELLINGHAM

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

The following is added to Paragraph C. **Who is An insured** in the Businessowners Liability Coverage Form.

4. Any person or organization shown in the schedule is also an Insured, but only with respect to liability arising out of your ongoing operations performed for that insured.