

## ADDITIONAL LIMITS ENDORSEMENT

Attached to and forming part of

**PROBIZ EXCEL PLUS** Policy No. \_\_\_\_\_

Period of Cover: From: \_\_\_\_\_ To: \_\_\_\_\_ 4:00 P.M.

It is hereby declared and agreed that in consideration of the additional premium You paid or agreed to pay to Us, as stated herein, for the period of cover indicated on this Endorsement, the Sum Insured under the policy is increased to as follows:

### SCHEDULE

Interest and Sum Insured	Fixed Glass Accidental Damage	Php _____ first loss limit any one occurrence and annual aggregate
	Commercial General Liability	Php _____ any one occurrence and annual aggregate
	Machinery and Electronic Equipment Breakdown	Php _____ any one occurrence and annual aggregate
	Extra Expense	Php _____ any one occurrence and annual aggregate 6 months Indemnity Period
	Employee Cover	<p>Php _____ per accident and annual aggregate, sub-limited to:</p> <p>A. Material Damage:            Php _____ first loss limit per occurrence and annual aggregate per employee</p> <p>B. Personal Accident:</p> <ol style="list-style-type: none"> <li>1. Php _____ as Capital Sum and for Accidental Death and Permanent Total Disablement</li> <li>2. % shown in the Table of Compensation for Permanent Partial Disablement</li> <li>3. Php _____ for Unprovoked Murder and Assault</li> <li>4. Php _____ for Accidental Medical Expenses</li> <li>5. Php _____ Accidental Burial Expenses</li> </ol>
	Money Inside Premises and In-Transit Robbery and Burglary	Php _____ any one occurrence and annual aggregate
	Employee Fraud and Dishonesty	Php _____ any one occurrence and annual aggregate
	Temporary Removal	Php _____ any one occurrence

COMMITTED. COMPASSIONATE. GENUINE.

COCOGEN INSURANCE, INC.

22F One Corporate Center, Doña Julia Vargas Avenue, corner Meralco Avenue, Ortigas Center, Pasig City 1600 Philippines

Tel. No.: (632) 8-811-1788 | Client Services: (632) 8-830-6000

E-mail: client\_services@cocogen.com | Website: www.cocogen.com

	Professional Fees	Php _____ any one occurrence
	Minor Alterations and Repairs	Php _____ any one occurrence
	Fire Brigade Charges	Php _____ any one occurrence
	Fire Fighting Expenses	Php _____ any one occurrence
	Debris Removal	Php _____ any one occurrence

Conditions, Endorsements and Clauses Applicable to this Policy:

In view of the above, You, the Policyholder, are charged the additional premium including the corresponding taxes, as follows:

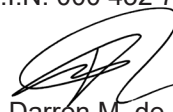
Additional Premium:	Php _____
Local Government Tax:	Php _____
Fire Service Tax:	Php _____
Documentary Stamps Tax:	Php _____
Value Added Tax:	Php _____
Others:	Php _____
Total:	Php _____

Except as varied above all other terms and conditions remain unaltered.

IN WITNESS WHEREOF, We, Cocogen Insurance, Inc. have caused this Endorsement to be signed by Our duly authorized representative this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ in \_\_\_\_\_, Philippines.

**COCOGEN INSURANCE, INC.**

T.I.N. 000 432 798



Atty. Darren M. de Jesus  
President