

**PERSONAL LIABILITY COVERAGE**

Attached to and forming part of

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

(This endorsement is only applicable when an amount of insurance and a corresponding additional premium are stated in the schedule.)

In consideration of **your** payment of additional premium as indicated in the schedule, **we** agree to pay for your legal liability to pay as damages for death, bodily injury and damage to property as specified below.

**Part A**

What is covered	What is not covered
<b>We will pay:</b>	<b>We will not pay:</b>
up to the limit stated in the policy schedule	the deductible stated in the policy schedule
for <b>your</b> legal liability	for <b>your</b> legal liability
as owner or occupier up to the sums insured stated in the <b>schedule</b> for any amounts <b>you</b> become legally liable to pay as damages for:  • death • <b>bodily injury</b> • damage to property  caused by an accident happening at the <b>premises</b> during the <b>period of insurance</b> .	(a) for <b>bodily injury</b> to: • <b>you</b> • any other permanent resident of the <b>home</b> • any person who at the time of sustaining such injury is engaged in <b>your</b> service or employ  (b) for <b>bodily injury</b> arising directly or indirectly from any communicable disease or condition  (c) arising out of any criminal act to another person or property  (d) for damage to property owned by or in the charge or control of: • <b>you</b> • any other permanent resident of the <b>home</b> • any person who at the time of sustaining such injury is engaged in <b>your</b> service  (e) arising directly or indirectly out of any profession, occupation, business or employment  (f) which <b>you</b> have assumed under contract and which would not otherwise have attached  (g) arising out of <b>your</b> ownership, possession or use of: • any motorized or horse drawn vehicle other than:



At UCPB GEN, every day starts with

UCPB General Insurance Company, Inc.

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	<ul style="list-style-type: none"> <li>(i) domestic gardening equipment used within the <b>premises</b> and</li> <li>(ii) domestic pedestrian controlled gardening equipment</li> </ul> <ul style="list-style-type: none"> <li>• any power-operated lift other than stairlifts</li> <li>• any aircraft or watercraft, rowing boats, punts or canoes</li> <li>• any animal other than cats, horses, or dogs which are not designated as dangerous under applicable laws and ordinances</li> </ul> <p>(h) in respect of any kind of pollution and/or contamination other than:</p> <ul style="list-style-type: none"> <li>• caused by a sudden, identified, unexpected and unforeseen accident which happens in its entirety during the <b>period of insurance</b> at the <b>premises</b> named in the <b>schedule</b>;</li> </ul> <p>(i) arising out of <b>your</b> ownership, occupation, possession or use of any land or <b>building</b> that is not within the <b>premises</b></p>
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## Part B

What is covered	What is not covered
<p><b>We will pay for:</b></p> <ul style="list-style-type: none"> <li>• all reasonable charges, expenses and legal costs incurred or obliged to be paid by <b>you</b> with <b>our</b> written consent in the settlement or defense of any claim made under Part A of this Endorsement</li> </ul>	<p><b>We will not pay:</b></p> <ul style="list-style-type: none"> <li>amounts in excess of the limit specified in the <b>schedule</b></li> </ul>

### Limit of Insurance

**We** will not pay more than the sum(s) insured shown in the **schedule** in respect of settlements under Part A & Part B of this Endorsement.

Except as varied in the Endorsement, all other terms and conditions of the Policy remain unaltered.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ in Pasig City, Philippines.

\_\_\_\_\_  
(Insured)

\_\_\_\_\_  
Authorized Signatory  
for

UCPB GENERAL INSURANCE  
COMPANY, INC.