

**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**

<b>Interest and Sum Insured</b>	<b>Fixed Glass Accidental Damage</b> Php _____ first loss limit any one occurrence and annual aggregate
	<b>Commercial General Liability</b> Php _____ any one occurrence and annual aggregate
	<b>Machinery and Electronic Equipment Breakdown</b> Php _____ any one occurrence and annual aggregate
	<b>Extra Expense</b> Php _____ any one occurrence and annual aggregate 6 months Indemnity Period
<b>Employee Cover</b>	Php _____ per accident and annual aggregate, sub-limited to: A. Material Damage: Php _____ first loss limit per occurrence and annual aggregate per employee
	B. Personal Accident: 1. Php _____ as Capital Sum and for Accidental Death and Permanent Total Disablement 2. % shown in the Table of Compensation for Permanent Partial Disablement 3. Php _____ for Unprovoked Murder and Assault 4. Php _____ for Accidental Medical Expenses 5. Php _____ Accidental Burial Expenses
	<b>Money Inside Premises and In-Transit Robbery and Burglary</b> Php _____ any one occurrence and annual aggregate
	<b>Employee Fraud and Dishonesty</b> Php _____ any one occurrence and annual aggregate
	<b>Temporary Removal</b> 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:

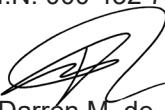
Additional Premium:	Php _____
Local Government Tax:	Php _____
Fire Service Tax:	Php _____
Documentary Stamps Tax:	Php _____
Value Added Tax:	Php _____
Others:	Php _____
Total:	Php _____

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