**CORNERSTONE INSURANCE PLC**

**COLLECTIVE ENDORSEMENT NO** **{ENDORSEMENTNO} ATTACHING TO AND FORMING PART OF** **{SUBRISK} POLICY NO** **{SUBRISK} IN THE NAME OF** **{INSUREDNAME}**

Notwithstanding anything contained herein to the contrary, it is hereby declared and agreed that with effect from **{StartDate}** up till and including **{EndDate}**the cover granted on this policy is hereby revised as details below:

{ListTable}

Consequently, a return premium of **=N=****{GrossPremium}** is due from the insured.

Subject otherwise to the Terms, Conditions and Exceptions of the policy

In witness thereof the authorized representatives of the Co-insurers have hereunto subscribed their signatures for their respective shares this **{TDate}**.

**Apportionment**

{ListTableCoinsurance}