

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT
CAREFULLY.**

UNREPORTED DRIVER

This endorsement modifies insurance provided under the following:

NAMED INSURED:

With respect to coverage provided by this endorsement, the provisions of the coverage form apply except as modified by this endorsement:

In the event that an "unreported driver" is involved in any accident to which this insurance would apply, the limit of insurance provided by this policy, including any accident with an uninsured or underinsured vehicle, shall be the lower of (1) the of insurance shown in the declarations or (2) the minimum liability insurance coverage required under the motor vehicle compulsory or financial responsibility laws of the state having jurisdiction with respect to the issuance of this policy or the state in which the accident occurred if the law of that state requires that its motor vehicle financial responsibility laws must be applied to the accident.

As used in this endorsement and policy:

Unreported driver means any person using a covered auto who has not been reported by you to us and whose name does not appear on the on the declarations or amended declarations of this policy at the time of such loss.

ALL OTHER TERMS AND CONDITIONS OF THE POLICY REMAIN UNCHANGED.

COMMERCIAL AUTOMOBILE LIABILITY SIC 21 32 1020

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COMMUNICABLE DISEASE EXCLUSION

THIS ENDORSEMENT MODIFIES INSURANCE PROVIDED UNDER
FOLLOWING:

COMMERCIAL AUTOMOBILE LIABILITY COVERAGE PART

A. The following exclusion is added to **The Policy**. This insurance does not apply to: **Communicable Disease**. Bodily injury or property damage arising out of the actual or alleged transmission of a communicable disease. This exclusion applies even if the claims against any insured allege negligence or other wrong doing in the:

- a.** Supervising, hiring, employing, training or monitoring of others that may be infected with and spread a communicable disease;
- b.** Testing for a communicable disease;
- c.** Failure to prevent the spread of the disease; or
- d.** Failure to report the disease to authorities.

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CYBER EXCLUSION

This endorsement modifies insurance provided under the following:

NAMED INSURED:

With respect to coverage provided by this endorsement, the provisions of the coverage form apply except as modified by this endorsement:

Exclusion of Cyber Acts

This Section of your insurance policy does not cover any loss, theft, damage, impairment, disablement or loss of use of your vehicle caused deliberately or maliciously by:

1. the use of, or failure of, any application, software, or program in connection with your vehicle's electronic control units and the control area network, including driver assistance, safety, security, infotainment or software updates whether authorized or unauthorized.
2. the use of, or failure of, any electronic device connected to your vehicle (for example smartphones, tablets or smartwatches used for navigation, infotainment or any other purpose)
3. any computer system virus, ransomware, code or software;
4. theft of, loss of access to, or damage to, any telematic device or any electronic data (for example files, music or images) wherever it is stored;
5. any threat, deception or hoax relating to 1,2,3, and/or 4 above.

Cyber Act means an unauthorized or malicious act or series of related unauthorized or malicious acts, regardless of time and place, or the threat or hoax thereof involving access to, processing of, use of or operation of any Computer System or any data by any person or group(s) of persons.

Computer System means any computer, hardware, software, information technology and communications system or electronic device, including any similar system or any configuration of the aforementioned and including any associated input, output or data storage device, electronic control units and control area network bus.



CA 21 96 09 22 - PENNSYLVANIA SPLIT UNDERINSURED MOTORISTS COVERAGE LIMITS – NONSTACKED

For a covered "motor vehicle" licensed or principally garaged in, or "auto dealer operations" conducted in, Pennsylvania, this endorsement modifies insurance provided under the following:

PENNSYLVANIA UNDERINSURED MOTORISTS COVERAGE – NONSTACKED

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured:
Endorsement Effective Date:

SCHEDULE

Limit Of Insurance		
"Bodily Injury":	\$	Each Person
	\$	Each "Accident"
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.		

Paragraph 1. of **Limit Of Insurance** is replaced by the following:

1. Regardless of the number of covered "motor vehicles", "insureds", premiums paid, claims made or vehicles involved in the "accident", the Limit of Insurance is as follows:
 - a. The most we will pay for all damages resulting from "bodily injury" to any one person caused by any one "accident" is the Limit Of Insurance for "Bodily Injury" shown in the Schedule for each person.
 - b. Subject to the limit for each person, the most we will pay for all damages resulting from "bodily injury" caused by any one "accident" is the Limit Of Insurance for "Bodily Injury" shown in the Schedule for each "accident".



CA 21 95 09 22 - PENNSYLVANIA SPLIT UNINSURED MOTORISTS COVERAGE LIMITS – NONSTACKED

For a covered "motor vehicle" licensed or principally garaged in, or "auto dealer operations" conducted in, Pennsylvania, this endorsement modifies insurance provided under the following:

PENNSYLVANIA UNINSURED MOTORISTS COVERAGE – NONSTACKED

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured:
Endorsement Effective Date:

SCHEDULE

Limit Of Insurance		
"Bodily Injury":	\$	Each Person
	\$	Each "Accident"
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.		

Paragraph 1. of **Limit Of Insurance** is replaced by the following:

1. Regardless of the number of covered "motor vehicles", "insureds", premiums paid, claims made or vehicles involved in the "accident", the Limit of Insurance is as follows:
 - a. The most we will pay for all damages resulting from "bodily injury" to any one person caused by any one "accident" is the Limit Of Insurance for "Bodily Injury" shown in the Schedule for each person.
 - b. Subject to the limit for each person, the most we will pay for all damages resulting from "bodily injury" caused by any one "accident" is the Limit Of Insurance for "Bodily Injury" shown in the Schedule for each "accident".

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PENNSYLVANIA ADDED AND COMBINATION FIRST-PARTY BENEFITS ENDORSEMENT

For a covered "auto" licensed or principally garaged in, or "auto dealer operations" conducted in, Pennsylvania, this endorsement modifies insurance provided under the following:

PENNSYLVANIA BASIC FIRST-PARTY BENEFIT

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured:

Endorsement Effective Date:

Basic First-party Benefit is changed as follows:

SCHEDULE

As indicated below, Added First-party Benefits or Combination First-party Benefits apply instead of the Basic First-party Benefit. The Limits Of Liability shown for the benefits selected below replace the Limits Of Liability shown in the Schedule for the Basic First-party Benefit.

Benefits	Limit Of Liability (Per Insured)
<input type="checkbox"/> Added First-party Benefits:	
Medical Expense Benefits	Up to \$
Work Loss Benefits	Up to \$ subject to a maximum of \$ per month
Funeral Expense Benefits	Up to \$
Accidental Death Benefits	\$
<input checked="" type="checkbox"/> Combination First-party Benefits:	
Maximum Total Limit For All Benefits	Up to \$35,000
Subject to the following individual limits:	
Medical Expense Benefits	No specific dollar amount
Work Loss Benefits	No specific dollar amount
Funeral Expense Benefits	Up to \$2,500
Accidental Death Benefits	\$
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Coverage

We will pay Added First-party Benefits or Combination First-party Benefits in accordance with the "Act" up to the limits stated in the Schedule or Declarations to or for an "insured" who sustains "bodily injury" caused by an "accident" and arising out of the maintenance or use of an "auto". We will only pay Combination First-party Benefits for expenses or loss incurred within three years from the date of the "accident".

In addition to the Medical Expense Benefits described in the Basic First-party Benefit endorsement, Added First-party Benefits and Combination First-party Benefits also consist of:

1. Work Loss Benefits consisting of:
 - a. Loss of income. Up to 80% of the gross income actually lost by an "insured".
 - b. Reasonable expenses actually incurred to reduce loss of income by hiring:
 - (1) Special help, thereby enabling the "insured" to work; or
 - (2) A substitute to perform the work a self-employed "insured" would have performed.

However, Work Loss Benefits do not include:

- a. Loss of expected income for any period following the death of an "insured";
 - b. Expenses incurred for services performed following the death of an "insured"; or
 - c. Any loss of income, or expenses incurred for services performed, during the first five working days the "insured" did not work after the "accident" because of the "bodily injury".
2. Funeral Expense Benefits. Actual expenses incurred for an "insured's" funeral or burial if "bodily injury" resulting from the "accident" causes his or her death within 24 months from the date of the "accident".
 3. Accidental Death Benefits. A death benefit paid if "bodily injury" resulting from an "accident" causes the death of you or any "family member" within 24 months from the date of the "accident".

B. Exclusions

In addition to the exclusions in the Basic First-party Benefit endorsement, the following exclusion also applies.

We will not pay:

Accidental Death Benefits on behalf of any person who intentionally caused or attempted to cause "bodily injury" to himself, herself or any other person.

C. Limit Of Insurance

1. Regardless of the number of covered "autos", premiums paid, claims made, "autos" involved in the "accident" or insurers providing First-party Benefits, the most we will pay to or for an "insured" as the result of any one "accident" is the limit shown in the Schedule or the Declarations. Combination First-party Benefits are subject to a maximum total single limit of liability with individual limits for specific benefits as shown in the Schedule or Declarations.
2. If Combination First-party Benefits are afforded, we will make available at least the minimum limit required by the "Act" for the Basic First-party Benefit. This provision will not change our total limit of liability.

D. Changes In Conditions

In addition to the conditions applicable to the Basic First-party Benefit endorsement, the following condition also applies:

Payment Of Accidental Death Benefits

The Accidental Death Benefit under this policy will be paid to the executor or administrator of the deceased "insured's" estate. If there is no executor or administrator, benefits shall be paid to:

1. The deceased "insured's" surviving spouse; or
2. If there is no surviving spouse, the deceased "insured's" surviving children; or
3. If there is no surviving spouse or surviving children, the deceased "insured's" estate.