

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**SUPPLEMENTARY PAYMENTS REDUCE THE LIMITS OF INSURANCE
ENDORSEMENT**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

A. Under SECTION I – COVERAGES, SUPPLEMENTARY PAYMENTS - COVERAGES A AND B is amended as follows:

a. Under Part 1. of SUPPLEMENTARY PAYMENTS, the final sentence which reads:

“These payments will not reduce the limits of insurance.”

is deleted in its entirety and is replaced with the following provision:

These payments will reduce the applicable limits of insurance.

b. Under Part 2. of SUPPLEMENTARY PAYMENTS, the second sentence in the paragraph immediately following subparagraph f. which reads:

“Notwithstanding the provisions of Paragraph 2. c. (2) of Section I – Coverage A - Bodily Injury and Property Damage Liability, such payments will not be deemed to be damages for “bodily injury” and “property damage” and will not reduce the limits of insurance.”

is deleted in its entirety and is replaced with the following provision:

Such payments will reduce the applicable limits of insurance.

B. SECTION III – LIMITS OF INSURANCE is amended to include the following additional provision:

All applicable Limits of Insurance are reduced by the payment of those amounts set forth under the SUPPLEMENTARY PAYMENTS - COVERAGES A AND B part of SECTION I – COVERAGES.

LIQUOR LIABILITY COVERAGE FORM

A. Under SECTION I – LIQUOR LIABILITY COVERAGE is amended as follows:

SUPPLEMENTARY PAYMENTS, the final sentence which reads:

“These payments will not reduce the limits of insurance.”

is deleted in its entirety and is replaced with the following provision:

These payments will reduce the applicable limits of insurance.

B. SECTION III – LIMITS OF INSURANCE is amended to include the following additional provision:

All applicable Limits of Insurance are reduced by the payment of those amounts set forth under the SUPPLEMENTARY PAYMENTS - SECTION I – LIQUOR LIABILITY COVERAGE.

All other terms and conditions of this Policy remain unchanged.

SAMPLE

Endorsement Number:

Policy Number:

Named Insured:

This endorsement is effective on the inception date of this Policy unless otherwise stated herein:

Endorsement Effective Date: