



ADDITIONAL *INSURED*

(State or Political Subdivisions-Permits Relating to Premises)

Refer to Supplemental Declarations if information is not shown on this form.

We provide coverage under this endorsement subject to the *terms* contained in the Liability coverage.

DEFINITION

The following additional *insured* is added to the definition of *insured* in the Liability coverage.

1. Any state or political subdivision designated in the schedule below, subject to the following additional provisions:
 - a. The insurance for any such *insured* applies only with respect to such of the following hazards for which the state or political subdivision has issued a permit in connection with premises owned by, rented to or controlled by the *named insured* and to which Coverage L-*Bodily Injury* and *Property Damage* of the Liability coverage Agreement applies:
 - 1) to the existence of, maintenance, repair, construction, erection or removal of advertising signs, awnings, canopies, cellar entrances, coal holes, driveways, manholes, marquees, hoistway openings, sidewalk vaults, street banners or decorations and similar exposures;
 - 2) to the construction, erection or removal of elevators; and
 - 3) to the ownership, maintenance or use of any elevators covered by the policy.
2. If Coverage L-*Bodily Injury* and *Property Damage* of the Liability Agreement is not otherwise afforded, such insurance shall nevertheless apply with respect to operations performed by or on behalf of the *named insured* in connection with the hazard for which the permit has been issued, subject to the limits of liability stated below.

SCHEDULE

Designation of State or Political Subdivision:

Limits of Liability

\$	each occurrence
\$	aggregate
Annual Premium	\$

WHAT WE DO NOT PAY FOR

This endorsement limits coverage for additional *insured(s)* to their vicarious liability arising from the hazards covered by this policy. **We** do not provide coverage for any liability arising out of any acts or omissions of any additional *insured(s)*, their *employees* or any other person or organization with which the additional *insured* has a contract or other relationship.