



Attached to and forming part of Policy No.:	
INSURED:	This endorsement shall be effective from: <input type="checkbox"/> AM _____ <input type="checkbox"/> PM _____ _____ _____ _____ Local Time YYYY MM DD

If more than one automobile is insured under this policy, this endorsement shall apply only to the following:

Model Year	Trade Name	Model or C.C.	V.I.N. (Serial No.)

1. Purpose of This Change

This change is part of your policy. It makes loss caused by fire subject to a deductible.

2. What You Agree To

In return for the premium charged, you agree that the deductible shown on your Certificate of Automobile Insurance under Specified Perils, Comprehensive or All Perils will apply to each claim under Section 7 of your policy for loss caused by fire.

All other terms and conditions of your policy remain the same.

Date _____ YYYY MM DD	_____ Signature of Insured(s)
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