

This endorsement changes the
 Personal Liability or Farm Personal Liability
 Coverage provided by this policy
 -- PLEASE READ THIS CAREFULLY --

ADDITIONAL INSURED

(The information required below may be shown on a separate schedule or on the Declarations.)

Name and Address of Person or Organization:

Location of Premises:

Interest:

The definition of **insured** includes the person or organization named above as the interest appears.

incidental operations of the premises.

Coverage applies only with respect to the premises shown above. This includes the necessary and

Coverage does not apply to **bodily injury** to an employee arising out of or in the course of employment by an **insured**.