

**GENERAL CHANGE ENDORSEMENT**

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

This endorsement changes the policy on the inception date of the policy or on the date shown below.  
It is agreed that the policy is changed as follows:

In consideration of additional premium shown below, the M 3745a(06/2009) Additional Insured Endorsement, has been added to the policy.


Action	Additional Insured	Premium		
		Old	New	AR
A	City of La Crosse 400 La Crosse Street Attn: Nikke Eilsen La Crosse, WI 54601		175	89

Additional Premium \$ 89

Return Premium \$ \_\_\_\_\_

Pro-Rate Factor: **0.510**

All other terms, conditions and agreements remain unchanged.

Company Name <b>National Indemnity Company</b>	Policy Number <b>70 APS 041637</b>
	Endorsement Effective <b>11/12/2013 1:38 PM</b>
Named Insured <b>DJL INC.</b>	Countersigned at by  (Authorized Representative)

(The Attaching Clause need be completed only when this endorsement is issued subsequent to preparation of the policy.)

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

## ADDITIONAL INSURED ENDORSEMENT

In consideration of payment of the additional premium listed below, LIABILITY COVERAGE is extended to include the additional insured named herein, provided that:

- 1) such insurance applies only to the ownership, maintenance or use of a covered auto; and
- 2) such insurance applies only to acts or omissions by you, your agents or your "employees" while such covered auto is being used in your business; and
- 3) such insurance does not apply to the acts or omissions of the additional insured or any of the additional insured's agents or "employees" other than you; and
- 4) such inclusion of additional insured shall not increase our limit of liability under this policy.


**ADDITIONAL INSURED:**

**City of La Crosse**

**400 La Crosse Street  
Attn: Nikke Eilsen  
La Crosse, WI 54601**

All other terms, conditions and agreements remain unchanged.

Additional Premium: \$ 89

Company Name <b>National Indemnity Company</b>	Policy Number <b>70 APS 041637</b>
Named Insured <b>DJL INC.</b>	Endorsement Effective <b>11/12/2013 1:38 PM</b>
	Countersigned by  (Authorized Representative)

(The Attaching Clause need be completed only when this endorsement is issued subsequent to preparation of the policy.)