**ENDORSEMENT**

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

Policy No: <Policy Number> <Endorsement Number>

Effective 12:01 a.m. <Policy or Endorsement Effective Date>

**RADIO AND TV BROADCASTERS**

**OFF PREMISES UTILITY FAILURE ENDORSEMENT**

This endorsement modifies insurance provided under the following:

BUSINESS INCOME AND EXTRA EXPENSE COVERAGE PART

**SCHEDULE**

|  |  |
| --- | --- |
| **Communication Supply Services Location(s)** | **Off Premises Utility Failure Limit of Insurance**  **(Business Income and Extra Expense Coverage Part)** |
|  | **per occurrence** |
|  |
|  |

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

**A.** Solely with respect to the Communication Supply Services Location(s) shown in the Schedule of the “Off Premises Utility Failure Endorsement” (hereinafter the “Schedule”), the Limit of Insurance for Off Premises Utility Failure for the Business Income and Extra Expense Coverage Part shown in Item 4. of the SUPPLEMENTAL DECLARATIONS is deleted and replaced with the Off Premises Utility Failure Limit of Insurance shown in the Schedule.

**B.** Solely with respect to the Communication Supply Services Location(s) shown in the Schedule, Subparagraph **A.5.**b.of Section **II. SUPPLEMENTAL COVERAGES** is deleted and replaced with the following:

b. **Communication Supply Services**, meaning the Communication Supply Service Location(s) shown in the Schedule and supplying communication services including radio or television services to the premises described in the Declarations, and to **your** mobile **broadcast equipment**.

**C.** The following is added to Section **VIII DEFINITIONS**:

**Broadcast Equipment** means permanently installed radio or television receiving, recording or transmitting equipment.

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

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Authorized Representative