

**Illinois FAIR Plan Association
Homeowners Policy
EXCLUSION OF COVERAGE ENDORSEMENT**

FOR OFFICE USE ONLY

Policy Number _____

Policy Period _____ To _____

Endorsement Effective Date _____

Named Insured(s):

Address of Insured Property:

City

Zip Code _____ - _____

1. **Section I Coverage(s) Exclusion**

It is agreed that under Section I of this policy the Illinois FAIR Plan Association will not pay for loss or damage to _____

(Complete description of property being excluded)

2. **Section II Coverage(s) Exclusion**

It is agreed that under Section II of this policy the Illinois FAIR Plan Association will not pay for loss or damage caused by, resulting from, contributed to or aggravated by

(Complete description of hazard being excluded)

which is owned by or in the care, custody or control of any insured.

This endorsement also applies to any reinstatement or renewal of this policy.

Signed _____
(Named Insured)

Date _____

Signed _____
(Named Insured)

Date _____

Signed _____
(Witness)

Date _____

-----SEE REVERSE SIDE-----

SPECIAL INSTRUCTIONS:

1. The box in both Section I & Section II must be checked and a complete description provided in both sections for a garage, shed, outbuilding and/or other structure being excluded from the policy.
2. Detail in Section II only any hazards which are to be specifically restricted from Bodily Injury and/or Property Damage Liability coverage. At a minimum, the information should respond to Type of Hazard and Insurance Claim/History. In the case of vicious animals, please also provide information as to physical description (breed/age/color etc.) as well as animal's name and license number (where required).