

WINDSOR-MT. JOY MUTUAL INSURANCE CO.

RESTRICTION OF INDIVIDUAL POLICIES

At *your* request, it is agreed that this policy is restricted as follows: The applicable restriction is marked by an "X".

- _____ It is hereby understood and agreed that Coverage B, Related Private Structures on the Premises, does not cover the _____ located on the insured premises.
- _____ Liability and Medical Payments to Others Coverages do not apply to occurrences resulting from the ownership of, use of, exposure to, or contact with horses.
- _____ Liability and Medical Payments to Others Coverages do not apply to occurrences resulting from the ownership of, use of, exposure to, or contact with trampolines on the insured premises.
- _____ Liability and Medical Payments to Others Coverages do not apply to occurrences resulting from the ownership of, use of, exposure to, or contact with swimming pools on the insured premises.
- _____ Liability and Medical Payments to Others Coverages do not apply to occurrences resulting from the ownership of, use of, exposure to, or contact with dogs.
- _____ Liability and Medical Payments to Others Coverages do not apply to occurrences resulting from the ownership, maintenance, or use of the steps, stairs, deck, or porch described here - _____ .

No reduction in premium will take place with this endorsement.

Insured: _____ (Date) _____ (Insured's Signature)

Insured: _____ (Date) _____ (Insured's Signature)

Policy Number: _____
(& all subsequent policies)