

REVIEWED

By HPreston at 10:20 am, Sep 08, 2022

CONSTRUCTION MANAGER-ADVISER EDITION

APPLICATION AND CERTIFICATE FOR PAYMENT

AIA DOCUMENT G732/CMa			PA	PAGE ONE OF PAGES
TO OWNER:	PROJECT;	Beechwood Independent Schools	APPLICATION 0 2	Distribution to:
edependent Board of Education		Phase 6B: Addition & Renovations		OWNER
50 Beechward Road		54 Beechwood Rd.	PERIOD TO: 9/11/2022	CONSTRUCTION
Fort Mitchell, KY 41017		Fort Milchell, KY 41017	PROJECT NO:	MANAGER
FROM CONTRACTOR:				ARCHITECT
McAndrews Windows and Glass			CONTRACT DATE: Muy 17, 2022	CONTRACTOR
820 State Avenue		t		
Cincumun, OH 45204		١.		
CONTRACT FOR: BP#206 Alum, Windows/Framed Entrances.	med Entrance			
CONTRACTOR'S APPLICATION FOR PAYMENT Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.	FOR PAY	TN	The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid to the Contract Documents.	ntractor's knowledge, or Payment has been Il amounts have been paid
1 MODIFIED CONTRACT SUM	*	h.	I from the Owner, and that current m. Andrews W. Adoly s. 4 C.	icales for Payment were issued and payment shown herein is now due,
	8	6	1 3	Date: 9/1/2022
(Column G on G703)	.1	County of have	County of the Lawrence hadron	BLAKE WAULIGMAN
010	4,429,71		me this to the second of cost and second of cost an	State of Ohio Wy Comm. Expires
(Column F on G703)		CERTIFIC	CERTIFICATE FOR PAYMENT	September 19, 2026
Total Retainage (Lines 5a + 5b or		In accorda	In accordance with the Contract Documents, based on evaluations of the Work and	tions of the Work and
	1 65	4,429.71	the data comprising this application, the Construction manager and Architect certify	r and Architect certify
6, YOTAL EARNED LESS REVAINAGE (Line 4 less Line 5 Total) 7, LESS PREVIOUS CERTIFICATUS FOR	& &.	39,867.39	to the Owner that to the best of their knowledge, information and bedief the Work has progressed as indicates, the quality of the Work is an accordance with the Contract December 1, and the Contractor is entitled to partners of the AMOLINE CERTIFIED.	and belief the Work has nee with the Contract MOUNT CERTIFIED.
	i 6/9	26,367.34		
8 - BALANCE TO ENTRY INCHEDING RETAINAGE	yPr Est	19 512 575	AMOUNT CERTIFIED	at condition for friend all
(Line 3 less lane 6)	L	Thurst and Council es	francea explanation if antonia cer afred affers from the antonia appaca for , titual an figures on this Application and on the Communitum Sheet that changed to conflorin to	Sheet duu changed to conform to the
CHANCE ORDER SUMMARY	SNOTHGGN	SNOT SHORT		; †
Total approved in previous mouths by Owner		By	TOND WITH	72-21-h mind
Lotal approved this morali melading Construction Change Directives	\$860.00	ARCTHIT	ARC ILLIAC I. (NOTE). If Multiple Poettis Comractors are responsible for performing partions of the Proposition of Architect's Corthesham is not required.	ponsible for preformine partions of
SIVIOI	\$860.00	\$0,000 By:	Date:	9-12-22
NET CHANGES by Change Order			5	
7		This Centing	amed herein, Essuance, payment and acc	EKTIFIED is payable only to the
		prejudice	prejudice to any rights of the Owner or Contractor under this Contract,	Contract.

9/1/2022

ALA Document G702, APPLICATION AND CERTIFICATION FOR PAYMENT, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

APPLICATION DATE:

APPLICATION NO.

9/11/2022

PERIOD TO:

ARCHITECT'S PROJECT NO.

				W					
\$4,429.71	\$542,022.90	#DIV/0!	\$44,297.10	\$15,000.00	\$0.00	\$29,297.10	\$586,320.00	GRAND TOTALS	
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00 OS	\$11,726.00	#DIV/0!	\$0.00				\$11,726.00	SUBMITTALS	16
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\$0.00	\$51,720.00	0%	\$0.00				\$51,720.00	SKYLIGHTS	(J)
\$830.05	\$74,704.50	10%	\$8,300.50		•	\$8,300.50	\$83,005.00	WINDOW PROCUREMENT	4
\$1.500.00	\$66,303.00	18%	\$15,000.00	\$15,000.00			\$81,303.00	GLASS	w
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RATE)	(C-G)		TO DATE (D+E+F)	(NOT IN D OR E)	24	(D+E)			
(IF VARIABLE	TO FINISH	(G ÷ C)	COMPLETED	PRESENTLY	THIS PERIOD	APPLICATION	VALUE		NO.
RETAINAGE	BALANCE	%	TOTAL	MATERIALS		WORK COMPLETED	SCHEDULED	DESCRIPTION OF WORK	ITEM
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PARTIAL WAIVER AND RELEASE OF CLAIMS FOR PAYMENT

STATE OF Oh, O					
COUNTY OF Ham I ton					
TO WHOM IT MAY CONCERN:					
WHEREAS, the undersigned ("Undersigned") has been employed	moding Catall Caret	in time	THOUNK		OIL HOOMOTPHOTION
MANAGER") to furnish and install	plant of Constitutions!		ject known as	R","CONTRACTOR	R", or "CONSTRUCTION
Breekwood Frelegendend Schools Dh	asu 6 A		/WDDO IECTIL	of which	
Beechwood Independent BOE	is the owner ("OWNER") and	on which Codell C.	enstruction		
is also a ("CONTRACTOR" or "CONSTRUCTION MANAGER")				_	
The Undersigned, for and in consideration of The Teem To	wassand For Hunden	1 XX/100 - 18 1	\$ 000.00 3	Dellara	
and in consideration of such sum and other good and valuable con	siderations, UPON RECIEPT, dol	es) for its heirs, executors	and administrators	harahy waiya and	release the Owner the
Contractor, the Contractor's Surety, the Construction Manage	r. the Construction Manager's s	urefy, and each of their ins	urers narents sub	o betelor seincibie	atitiae affiliatae mamhare
past and present officers, directors, heirs, and administrators, from	any and all suits, debts, demands	, torts, charges, causes of	action and claims t	or payment, includit	ng claims under the laws or
statutes of the municipality, state or federal government relating to addition all lien, or claim of, or right to, iten, under municipal, state,	payment bonds, the Miller Act, or or federal laws or statutes, relation	other act or statute including the country of the c	ig prompt payment	statutes, or bonds i	relating to the Project, and
improvements inereon, and on the material relating to mechanics' l	iens, payment bonds, the Miller Ac	chor olber law, act, or statu	te with respect to a	and on said above-	described premises and on
ine material, fixtures, apparatus or machinery furnished, and on the	moneys, funds or other considera	ition due or to become due	from the Owner of	n account of arigina	nout of or relation in any w
to the labor, services, material, fixtures, equipment, apparatus or m	achinery furnished by the Undersi	gned, on the above-describ	ed Project from the	beginning of time	through the date indicated
pelow, including extras.* The undersigned certifies, warrants, and g Project.	oaramees mat all work it has pent	ormed on the Project has o	een performed in a	ccordance with its o	contract documents on the
Date: 9/1/2022		2 1	7	ſ	
	Name o	of Company Mc Aug	drews Wi.	ndows + Col	ass
Signature: & D.1		of Company <u>Mc Aug</u> bed and sworn before me	(Undersigned	1)	
	Cubani	had and swarp before me	deia /	. Sortaul	S.5 00 VIE
Printed Name: Sean Donalec	Supscii	ned and sworn before me	inis <u> </u>	or sept there	,20 52 -
E-segment.			210 10	1 Section	BLAKE WAULI
ifle of Person Signing: IVESSIVEV	Notar	y Signature and Seal:	Dunn		
The transport of the state of t	written, to the contract, and Claim:	s as defined in the Undersi	gned's contract witi	THE DWINER, CO.	TTRACTOR, OState of Oh
onstruction manager, all waivers and releases must be for officer signing wavier and release should be set forth: if waiver and	frelease is for a partnership, the r	o release is for a corporation	on, corporate name	Should be used to	propertie seal altitled and fill
	······	and cramp name anodio of	s used, partiter site	and sufficient regards	विकास
ATE OF Ohio	CONTRACTOR'S AFFIDAY	<u>(IT</u>	1111-1111-1111-1111-1111-1111-1111-1111-1111	Marcolling of the Wilder	MINERAL SOCIETY OF THE STATE OF
DUNTY OF Ham: / to a					
	- 1		100000		
E Undersigned, being duly swom, deposes and says that (s)he	Sean Donker	thi	· Treasu	ver	
mindreus Wildows + Glass	("Company name and Ur	dersigned"), who is the c	antractor for the		
Glass of Windows + Mitchell KY 41013 owned by Beech	w	rk on the project ("Project") located at 54	Beechward R	oact
inh Codell Construction	is a liContractorii en liCon	SOG.		("Ow	ner") and on
		attuction Manager J.			
al it has received payment of \$_13,500,00	prior to this payment.				
at all waivers and releases are true, correct, and genuine and delive	ered unconditionally and that there	e is no claim either legal or	equitable to defeat	the validity of said	· ·
eases. That the following are the names of all parties who have fur rlions of said work or for material entering into the construction then	maneu material, equipment, servic			and the second second	waivers or
tenat required to complete said work according to plans and specifi	and and the amount due or to become	ces, or labor for said work a	ind all parties havir	a contracte or sub-	contracte for enacific
,	cations. The Undersigned agrees	ome due each and that the	items mentioned in	ng contracts or subc nclude all labor, equ Owner, Contracto	contracts for specific ripment, services, and
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RIVECIT-09

REVISION NUMBER:

KMURRAY

9/1/2022

CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT Katie Murray Cincinnati/ AssuredPartners NL 5905 E. Galbraith Rd., Suite 5000 Cincinnati, OH 45236 PHONE (A/C, No, Ext): (513) 624-1719 1719 FAX (A/C, No); (513) 333-0735 E-MAIL ADDRESS: katie.murray@assuredpartners.com INSURER(S) AFFORDING COVERAGE NAIC# INSURER A. National Trust Insurance Company 20141 INSURED INSURER B: River City Glass Inc dba McAndrews Windows & Glass INSURER C 820 Staté Ave INSURER D Cincinnati, OH 45204 INSURER E INSURER F

IN	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT	REM AIN,	ENT, TERM OR CONDITION OF THE INSURANCE AFFORDED	ANY CONTRA BY THE POLIC	CT OR OTHEI	R DOCUMENT WITH RESPE BED HEREIN IS SUBJECT T	ECT TO	O WHICH THIS
INSR	TYPE OF INSURANCE	ADDL S	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMIT	s	
Α	X COMMERCIAL GENERAL LIABILITY	11.11.00			Listing W. Marchaller		EACH OCCURRENCE	5	1,000,000
	CLAIMS-MADE X OCCUR	х	Х	CPP100031698-03	12/1/2021	12/1/2022	DAMAGE TO RENTED PREMISES (Ea occurrence)	5	300,000
		^	^				MED EXP (Any one person)	\$	10,000
							PERSONAL & ADV INJURY	\$	1,000,000
	CENH ACCRECATE LIMIT ARRIVE DED.						GENERAL AGGREGATE	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- X LOC						PRODUCTS - COMP/OP AGG	s	2,000,000
	The second secon						OH STOP GAP	•	1,000,000
Α	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	5	1,000,000
	X ANY AUTO			CA100031699	12/1/2021	12/1/2022	BODILY INJURY (Per person)	s	
	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	s	
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	5	
								s	
Α	X UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	s	5,000,000
	EXCESS LIAB CLAIMS-MADE			UMB100031700-03	12/1/2021	12/1/2022	AGGREGATE	5	5,000,000
	DED X RETENTION\$							s	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER OTH- STATUTE ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED? (Mandalory in NH)	141.73					E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	5	
Α	Installation			CPP100031698-03	12/1/2021	12/1/2022	Jobsite Limit		50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) THE FOLLOWING POLICY PROVISIONS APPLY WHEN REQUIRED BY WRITTEN CONTRACT:

CERTIFICATE NUMBER:

Additional Insured

COVERAGES

General Liability: CG2010 Ongoing Operations; CG2037 Completed Operations; CGL088 Lessor of Leased Equipment; CG2032

Engineers/Architects/Surveyors-Not Engaged by the Named Insured

Automobile Liability: CAU058

Umbrella follows the underlying General Liability, Auto Liability, and Employer Liability forms

SEE ATTACHED ACORD 101

0	EDT	CIEI	CAT	TE I	IOI	DFR
			1.00			1200

CANCELLATION

Beechwood Independent Schools Board of Education 50 Beechwood Road Fort Mitchell, KY 41017

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

ADDITIONAL REMARKS SCHEDULE

Page	1	of	1
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AGENCY Cincinnati/ AssuredPartners NL POLICY NUMBER		NAMED INSURED River City Glass Inc dba McAndrews Windows & Glass 820 State Ave Cincinnati, OH 45204
SEE PAGE 1		
CARRIER	NAIC CODE	
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:

Pollution Liability: EN0111

Primary/Non-contributory General Liability: CG2001 Automobile Liability: CAU082

Umbrella: UMB179 Pollution Liability: EN0147

Waiver of Subrogation General Liability: CGL088 Automobile Liability: CAU058 Umbrella: CU2403 Pollution Liability: EN0109

Definition of occurrence is amended to include damage to "your work", if the damaged work or the work out of which the damage arises was performed on your behalf by a subcontractor and the "property damage" to "your work" is included in the "products-completed operations hazard".

Project - Beechwood Independent Schools Phase 6B: Additions and Renovations Stored Materials located at 820 State Ave., Cincinnati, OH 45204 - value \$ 15,000

Beechwood Independent Schools Board of Education, Codell Construction Company, Robert Ehmet Hayes & Associates PLLC, Shrout Tate Wilson, and GOP Limited are named as Additional Insured. Policy provisions stated above apply when required by written contract or agreement.

POLICY NUMBER: CPP100031698

COMMERCIAL GENERAL LIABILITY CG 20 10 12 19

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
ANY PERSON OR ORGANIZATION WHOM YOU ARE REQUIRED TO ADD AS AN ADDITIONAL INSURED ON THIS POLICY UNDER A WRITTEN CONTRACT OR AGREEMENT.	ALL PROJECTS AS OUTLINED UNDER WRITTEN CONTRACT OR AGREEMENT
Information required to complete this Schedule, if not sho	wn above, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - 1. Your acts or omissions; or
 - The acts or omissions of those acting on your behalf:

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

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C. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

POLICY NUMBER: CPP100031698

COMMERCIAL GENERAL LIABILITY CG 20 37 12 19

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
ANY PERSON OR ORGANIZATION WHOM YOU ARE REQUIRED TO ADD AS AN ADDITIONAL INSURED ON THIS POLICY UNDER A WRITTEN CONTRACT OR AGREEMENT.	ALL PROJECTS AS OUTLINED UNDER WRITTEN CONTRACT OR AGREEMENT
Information required to complete this Schedule, if not sh	own above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable limits of insurance:

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

COMMERCIAL GENERAL LIABILITY CG 20 01 12 19

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART LIQUOR LIABILITY COVERAGE PART PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

(1) The additional insured is a Named Insured under such other insurance; and

(2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured. THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

FIRST CHOICE CONTRACTORS LIABILITY ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

NOTE: The following are additions, replacements and amendments to the Commercial General Liability Coverage Form, and will apply unless excluded by separate endorsement(s) to the Commercial General Liability Coverage Form.

The COMMERCIAL GENERAL LIABILITY COVERAGE FORM is amended as follows:

SECTION I - COVERAGES, COVERAGE A. BODILY INJURY AND PROPERTY DAMAGE is amended as follows:

1. Extended "Property Damage"

Exclusion 2.a., Expected or Intended Injury, is replaced with the following:

a. "Bodily injury" or "property damage" expected or intended from the standpoint of the insured. This exclusion does not apply to "bodily injury" or "property damage" resulting from the use of reasonable force to protect persons or property.

2. Non-owned Watercraft

Exclusion 2.g. (2) (a) is replaced with the following:

(a) Less than 51 feet long; and

3. Property Damage Liability - Borrowed Equipment

The following is added to Exclusion 2.j. (4):

Paragraph (4) of this exclusion does not apply to "property damage" to borrowed equipment while at a jobsite and not being used to perform operations. The most we will pay for "property damage" to any one borrowed equipment item under this coverage is \$25,000 per "occurrence". The insurance afforded under this provision is excess over any other valid and collectible property insurance (including deductible) available to the insured, whether primary, excess, contingent or on any other basis.

4. Limited Electronic Data Liability

Exclusion 2.p. is replaced with the following:

p. Electronic Data

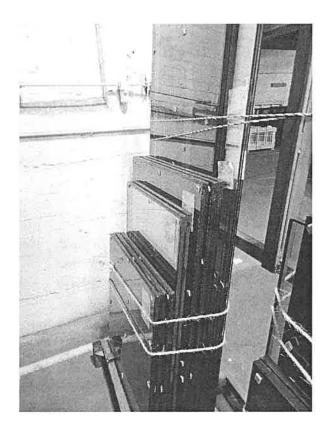
Damages arising out of the loss of, loss of use of, damage to, corruption of, inability to access, or inability to manipulate "electronic data" that does not result from physical injury to tangible property.

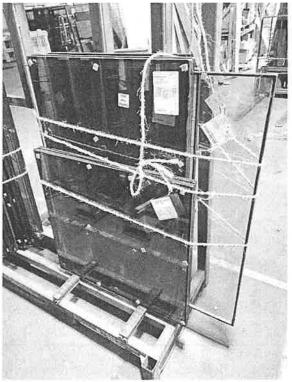
The most we will pay under Coverage A for "property damage" because of all loss of "electronic data" arising out of any one "occurrence" is \$10,000.

We have no duty to investigate or defend claims or "suits" covered by this Limited Electronic Data Liability coverage.

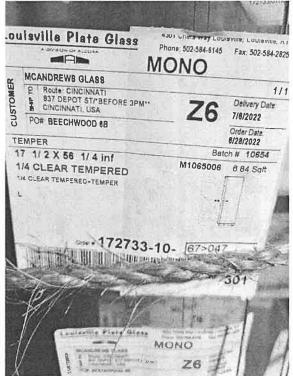
The following definition is added to **SECTION V – DEFINITIONS** of the Coverage Form:

"Electronic data" means information, facts or programs stored as or on, created or used on, or transmitted to or from computer software (including systems and applications software), hard or floppy disks, CD-ROMS, tapes, drives, cells, data processing devices or any other media which are used with electronically controlled equipment.

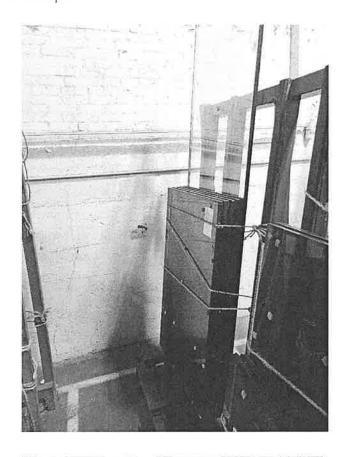




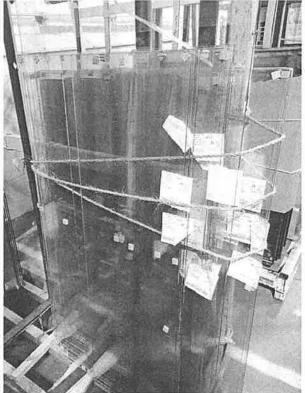




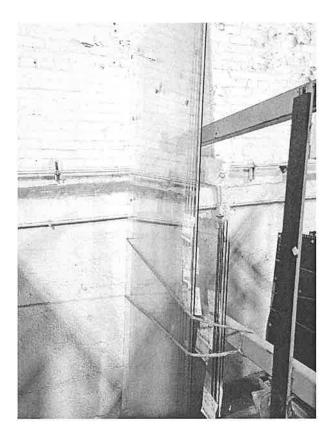








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4. Paragraph 6. is replaced with the following:

6. Representations

By accepting this policy, you agree:

- a. The statements in the Declarations are accurate and complete;
- b. Those statements are based upon representations you made to us; and
- c. We have issued this policy in reliance upon your representations.

Any error or omission in the description of, or failure to completely describe or disclose any premises, operations or products intended to be covered by the Coverage Form will not invalidate or affect coverage for those premises, operations or products, provided such error or omission or failure to completely describe or disclose premises, operations or products was not intentional.

You must report such error or omission to us as soon as practicable after its discovery. However, this provision does not affect our right to collect additional premium charges or exercise our right of cancellation or nonrenewal.

5. The following is added to paragraph 8. Transfer Of Rights Of Recovery Against Others To Us:

We waive any right of recovery against any person or organization, because of any payment we make under this Coverage Part, to whom the insured has waived its right of recovery in a written contract or agreement. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person or organization prior to loss.

6. Paragraph 10. is added as follows:

10. Liberalization

If we revise this Coverage Form to provide more coverage without additional premium charge, your policy will automatically provide the additional coverage as of the day the revision is effective in the applicable state(s).