

## SUPPLEMENTAL DECLARATIONS

<b>COMPANY</b>	<b>POLICY NO.</b>
<b>INSURED</b>	

Item No.	Amount Fire or Fire and Extended Coverage or Other Peril	Percent of Coinsurance Applicable	Rate	Premium	Description and Location of Property Covered
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	
	\$			\$	

**MORTGAGE HOLDER INFORMATION**

(THE INTERESTS OF LOSS PAYEES, MORTGAGEES ARE AUTOMATICALLY RECOGNIZED HEREON AS AND WHEN APPLICABLE.)

MORTGAGE HOLDER NAME	LOAN #	ADDRESS	CITY	STATE	ZIP

**DEDUCTIBLES (BASED ON A PER LOCATION/PER BUILDING BASIS)**

\$ <b>PROPERTY DEDUCTIBLE</b> \$	<b>WIND/HAIL DEDUCTIBLE</b>
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