

**Exhibit N**

**Certificate of Development Liability Insurance  
(Public Version)**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/20/2021

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).

|                                                                                                                         |  |                                                                                                                                                                  |                        |
|-------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| <b>PRODUCER</b><br>Brown & Brown Insurance of Delaware Valley<br>2000 Midlantic Dr, Suite 440<br><br>Mt Laurel NJ 08054 |  | <b>CONTACT NAME:</b> Vicky Cox<br><b>PHONE (A/C, No, Ext):</b> (856) 552-6330<br><b>FAX (A/C, No):</b> (856) 840-8484<br><b>E-MAIL ADDRESS:</b> VCox@bbdvins.com |                        |
|                                                                                                                         |  | <b>INSURER(S) AFFORDING COVERAGE</b>                                                                                                                             |                        |
|                                                                                                                         |  | <b>INSURER A:</b> Federal Insurance Company                                                                                                                      | <b>NAIC #</b><br>20281 |
| <b>INSURED</b>                                                                                                          |  | <b>INSURER B:</b> Evanston Insurance Company                                                                                                                     |                        |
| Nottingham Solar LLC<br>400 Market Industrial Park #32<br><br>Wappingers Falls NY 12590                                 |  | <b>INSURER C:</b>                                                                                                                                                |                        |
|                                                                                                                         |  | <b>INSURER D:</b>                                                                                                                                                |                        |
|                                                                                                                         |  | <b>INSURER E:</b>                                                                                                                                                |                        |
|                                                                                                                         |  | <b>INSURER F:</b>                                                                                                                                                |                        |

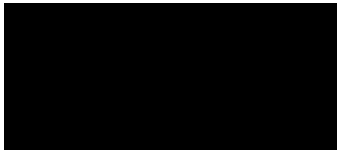

**COVERAGES****CERTIFICATE NUMBER:** [REDACTED]**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE                                                                                                                                                                                                                                                                                               | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                                                                                                                                                                                                                                                        |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|---------------|-------------------------|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: |           |          | 36064246      | 03/21/2021              | 03/21/2022              | EACH OCCURRENCE \$ 2,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 50,000<br>PERSONAL & ADV INJURY \$ 2,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>Employee Ben Liab \$ 1,000,000 |
| A        | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY                                         |           |          | 7362-03-19    | 03/21/2021              | 03/21/2022              | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>Hired & Non Owned Auto \$ 1,000,000                                                                                        |
| A        | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000                                  |           |          | 7819-24-17    | 03/21/2021              | 03/21/2022              | EACH OCCURRENCE \$ 10,000,000<br>AGGREGATE \$ 10,000,000<br>\$                                                                                                                                                                                                                |
| A        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below                                                                                                                   | Y/N<br>N  | N/A      | 7183-35-21    | 03/21/2021              | 03/21/2022              | PER STATUTE OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000                                                                                                                                  |
| B        | Professional Liability                                                                                                                                                                                                                                                                                          |           |          | CPLMOL105821  | 03/21/2021              | 03/21/2022              | Occurrence \$1,000,000<br>Aggregate \$1,000,000                                                                                                                                                                                                                               |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

|                                                                                     |                                                                                                                                                                                                                                                                                              |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p>  |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

© 1988-2015 ACORD CORPORATION. All rights reserved.

# Additional Named Insureds

Other Named Insureds

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

## ADDITIONAL COVERAGES

|         |             |               |                   |                 |         |
|---------|-------------|---------------|-------------------|-----------------|---------|
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |
| Ref #   | Description | Coverage Code | Form No.          | Edition Date    |         |
| Limit 1 | Limit 2     | Limit 3       | Deductible Amount | Deductible Type | Premium |

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

## **COMMERCIAL LIABILITY BROADENING ENDORSEMENT- ENERGY**

This endorsement modifies insurance provided under the following:

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

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

### **SCHEDULE – EXTENSIONS OF COVERAGE**

| <b>Coverages</b>                                                                                       |                                           |
|--------------------------------------------------------------------------------------------------------|-------------------------------------------|
| Additional Insured                                                                                     | Incidental Medical Services Coverage      |
| Additional Insured – Vendors                                                                           | Liberalization                            |
| Blanket Waiver Of Subrogation                                                                          | Non Employment Discrimination             |
| Broadened Bodily Injury                                                                                | Non-owned Watercraft Coverage             |
| Broadened Named Insured                                                                                | Personal And Advertising Injury           |
| Duties In The Event Of An Occurrence, Offense, Claim Or Suit                                           | Supplementary Payments – Increased Limits |
| Expected Or Intended Injury                                                                            | Unintentional Failure To Disclose Hazards |
| Fire, Explosion, Sprinkler Leakage Or Lightning Legal Liability Coverage                               |                                           |
| Information required to complete this Schedule, if not shown above, will be shown in the Declarations. |                                           |

Coverage extensions under this section only apply in the event that no other specific coverage for these extensions is provided under this policy. If such specific coverage applies, the terms, conditions and limits of that coverage are the sole and exclusive coverage applicable under this policy, unless otherwise noted in this endorsement.

#### **1. Additional Insured**

Paragraph 2. of **Section II – Who Is An Insured** is amended by the addition of the following:

- e. Any person or organization is included as an additional insured, but only to the extent such person or organization is held liable for “bodily injury”, “property damage” or “personal and advertising injury” caused by your acts or omissions. With respect to the insurance afforded to such insured, all of the following additional provisions apply:
  - (1) You and such person or organization have agreed in a written “insured contract” that such person or organization be added as an additional insured under this policy;
  - (2) The “bodily injury”, “property damage” or “personal and advertising injury” for which said person or organization is held liable occurs subsequent to the execution of such “insured contract”;
  - (3) The most we will pay is the lesser of either the Limits of Insurance shown in the Declarations or the Limits of Insurance required by the “insured contract”;

- (4) Such person or organization is an insured only with respect to:
- (a) Their ownership, maintenance, or use of that part of the premises, or land, owned by, rented to, or leased to you, except such person or organization is not an insured with respect to structural alterations, new construction or demolition operations performed by or on behalf of such person or organization;
  - (b) Your ongoing operations performed for that insured;
  - (c) Their financial control of you, except such person or organization is not an insured with respect to structural alterations, new construction or demolition operations performed by or on behalf of such person or organization;
  - (d) The maintenance, operation or use by you of equipment leased to you by such person or organization;
  - (e) Operations performed by you or on your behalf and for which a state or political subdivision has issued a permit, provided such operations are not performed for such state or political subdivision, and are not included within the “products-completed operations hazard”;
- (5) This insurance does not apply to “bodily injury”, “property damage”, “personal and advertising injury”, “occurrence” or offense:
- (a) Which takes place at a particular premise after you cease to be a tenant of that premises;
  - (b) Which takes place after all work, including materials, parts or equipment furnished in connection with such work to be performed by or on behalf of the additional insured at the site of the covered operations, has been completed;
  - (c) Which takes place after that portion of “your work” out of which the injury or damage arises has been put to its intended use by any other person or organization other than another contractor or subcontractor engaged in performing operations for a principal as part of the same project;
  - (d) Which takes place after the expiration of any equipment lease to which (4)(d) above applies;
- (6) With respect to architects, engineers or surveyors, coverage does not apply to “bodily injury”, “property damage” or “personal and advertising injury” arising out of the rendering or failure to render any professional services by or for you, including:
- (a) The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders, or drawings and specifications;
  - (b) Supervisory, inspection, architectural or engineering services.

However, if an Additional Insured endorsement is attached to this policy that specifically names a person or organization as an insured, then this subsection 2.e. does not apply to such person or organization.

## 2. Additional Insured – Vendors

Unless the “products-completed operations hazard” is excluded from this policy, paragraph 2. of **Section II – Who Is An Insured** is amended by the addition of the following:

- f. Any vendor of yours is included as an additional insured, but only with respect to “bodily injury” or “property damage” caused by “your products” which are distributed or sold in the regular course of the vendor’s business, subject to the following additional exclusions:
- (1) The insurance afforded to the vendor does not apply to:
- (a) “Bodily injury” or “property damage” for which the vendor is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages that the vendor would have in the absence of the contract or agreement;
  - (b) Any express warranty unauthorized by you;
  - (c) Any physical or chemical change in the product made intentionally by the vendor;
  - (d) Repackaging, unless unpacked solely for the purpose of inspection, demonstration, testing, or the substitution of parts under instructions from the manufacturer, and then repackaged in the original container;
  - (e) Any failure to make such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of the products;

- (f) Demonstration, installation, servicing or repair operations, except such operations performed by the vendor in full compliance with the manufacturer's written instructions at the vendor's premises in connection with the sale of the product;
  - (g) Products which, after distribution or sale by you, have been labeled or relabeled or used as a container, part or ingredient of any other thing or substance by or for the vendor; or
  - (h) "Bodily injury" or "property damage" arising out of the liability of the vendor for its own acts or omissions or those of its employees or anyone else acting on its behalf.
- (2) This insurance does not apply to any insured person or organization from whom you have acquired such products or any ingredient, part or container, entering into, accompanying or containing such products.

However, if an Additional Insured – Vendors endorsement is attached to this policy that specifically names a person or organization as an insured, then this subsection 2.f. does not apply to that person or organization.

### 3. Blanket Waiver Of Subrogation

Paragraph 8. Transfer Of Rights Of Recovery Against Others To Us of Section IV – Commercial General Liability Conditions and Section IV – Products/Completed Operations Liability Conditions is replaced by the following:

#### Transfer Of Rights Of Recovery Against Others To Us And Blanket Waiver Of Subrogation

- a. If the insured has rights to recover all or part of any payment we have made under this Coverage Part, those rights are transferred to us. The insured must do nothing after the loss to impair those rights. At our request, the insured will bring "suit" or transfer those rights to us and help us enforce them.
- b. If required by a written "insured contract" executed prior to the "occurrence" or offense, we waive any right of recovery we may have against any person or organization named in such "insured contract", because of payments we make for injury or damage arising out of your ongoing operations or "your work" for that person or organization.

### 4. Broadened Named Insured

Paragraph 3. of Section II – Who Is An Insured is replaced by the following:

Any organization that you own at the inception of this policy, or newly acquire or form during the policy period, and over which you maintain during the policy period majority ownership or majority interest, will qualify as a Named Insured if:

- a. There is no other similar insurance available to that organization;
- b. The first Named Insured shown in the Declarations has the responsibility of placing insurance for that organization; and
- c. That organization is incorporated or organized under the laws of the United States of America.

However:

- a. Coverage under this provision is afforded only until the next occurring annual anniversary of the beginning of the policy period shown in the Declarations, or the end of the policy period, whichever is earlier;
- b. Coverage **A** does not apply to "bodily injury" or "property damage" that occurred before you acquired or formed the organization; and
- c. Coverage **B** does not apply to "personal and advertising injury" arising out of an offense committed before you acquired or formed the organization.

The final paragraph of Section II – Who Is An Insured is replaced by the following:

No person or organization is an insured with respect to the conduct of any current or past partnership, joint venture, or limited liability company that is not shown as a Named Insured in the Declarations. However, this does not apply to a limited liability company that meets all of the conditions of Section II – Who Is An Insured, above.



## 5. Broadened Bodily Injury

Paragraph 3. of **Section V – Definitions** is replaced by the following:

"Bodily injury" means bodily injury, disability, sickness or disease sustained by a person, including death resulting from any of these at any time. "Bodily injury" includes mental anguish or other mental injury resulting from "bodily injury".

## 6. Duties In The Event Of An Occurrence, Offense, Claim Or Suit

Paragraph 2.a. of **Section IV – Commercial General Liability Conditions** is replaced by the following:

a. You must see to it that we or any licensed agent of ours are notified of a general liability "occurrence" or offense which may result in a claim as soon as practicable after it becomes known to:

- (1) You, if you are an individual;
- (2) Your partner or member, if you are a partnership or joint venture;
- (3) Your member, if you are a limited liability company;
- (4) Your executive officer if you are an organization other than a partnership, joint venture or limited liability company; or
- (5) Your authorized representative or insurance manager.

Knowledge of an "occurrence" or offense by persons other than those listed above does not imply that those listed above also have such knowledge.

b. To the extent possible, notice should include:

- (1) How, when and where the "occurrence" or offense took place;
- (2) The names and addresses of any injured persons and witnesses; and
- (3) The nature and location of any injury or damage arising out of the "occurrence" or offense.

## 7. Expected Or Intended Injury

Paragraph 2.a. **Expected Or Intended Injury** of the **Exclusions** provision of **Section I – Coverages, Coverage A – Bodily Injury And Property Damage Liability** is replaced by the following:

### **Expected Or Intended Injury**

"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.

## 8. Fire, Explosion, Sprinkler Leakage Or Lightning Legal Liability Coverage

The final paragraph of the **Exclusions** provision of **Section I – Coverages, Coverage A – Bodily Injury And Property Damage Liability** is replaced by the following:

Exclusions c. through n. do not apply to damage by fire, explosion, sprinkler leakage or lightning to premises while:

- (1) Rented to you;
- (2) Temporarily occupied by you with the permission of the owner; or
- (3) Managed by you under a written agreement with the owner.

A separate limit of insurance applies to this coverage as described in **Section III – Limits Of Insurance**.

Paragraph 6. of **Section III – Limits Of Insurance** is replaced by the following:

Subject to paragraph 5. above, the Damage to Premises Rented To You Limit shown in the Declarations, for "property damage" to any one premises while rented to you, or in the case of damage by fire, explosion, sprinkler leakage, or lightning while rented to you, temporarily occupied by you with the permission of the owner, or managed by you under a written agreement with the owner, is the greater of:

- a. \$300,000 Any One Premises; or
- b. The Damage To Premises Rented To You Limit shown in the Declarations.

Subsections **4.b.(1)(a)(ii)** and **4.b.(1)(a)(iii)** of paragraph **4.b. Excess Insurance** of the **Other Insurance** condition of **Section IV – Commercial General Liability Conditions** is replaced by the following:

- (ii) That is Fire, Explosion, Sprinkler Leakage, or Lightning insurance for premises while rented to you, temporarily occupied by you with permission of the owner, or managed by you under a written agreement with the owner;
- (iii) That is insurance purchased by you to cover your liability as a tenant for “property damage” to premises rented to you, temporarily occupied by you with the permission of the owner, or managed by you under a written agreement with the owner;

Paragraph **9.a. of Section V – Definitions** is replaced by the following:

- a. A contract for a lease of premises. However, that portion of the contract for a lease of premises that indemnifies any person or organization for damage by fire, explosion, sprinkler leakage, or lightning to premises while rented to you, temporarily occupied by you with permission of the owner, or managed by you under a written agreement with the owner, is not an “insured contract”;

## 9. Incidental Medical Services Coverage

**Section I – Coverages** is amended to include the following additional coverage:

We will pay for “bodily injury” arising out of the rendering of or failure to render the following treatment or services by an “employee” or “volunteer worker” for an accident occurring during the policy period:

- a. First aid treatment including cardiopulmonary resuscitation (CPR); and
- b. Medical, surgical, dental, x-ray, or nursing service or treatment, or the furnishing of food or beverages in connection therewith; and the furnishing or dispensing of drugs, or medical, dental, or surgical supplies or appliances.

However, this coverage does not apply to any insured or to any entity engaged in the business or occupation of providing the services or treatments described in **a.** and **b.** above.

Paragraph **e. Employer’s Liability** of the **Exclusions** provision of **Section I – Coverages, Coverage A – Bodily Injury And Property Damage Liability** does not apply to psychological injury arising out of the services described above.

## 10. Liberalization

**Section IV – Commercial General Liability Conditions** is amended by the addition of the following condition:

### Liberalization

If we revise this endorsement to provide more coverage without additional premium charge, we will automatically provide the additional coverage to all endorsement holders as of the day the revision is effective in your state.

## 11. Non Employment Discrimination Liability

Unless “personal and advertising injury” is excluded from this policy, the following applies:

Paragraph **14. of Section V – Definitions** is amended by the addition of the following:

“Personal and advertising injury” also means injury, including consequential “bodily injury” arising out of “discrimination”.

**Section V – Definitions** is amended by the addition of the following:

“Discrimination” means the unlawful treatment of a person or class of persons because of their specific race, color, religion, gender, age or national origin in comparison to one or more persons who are not members of the specified class.

Paragraph **2. Exclusions** of **Section I – Coverages, Coverage B – Personal And Advertising Injury Liability** is amended by the addition of the following exclusions:

This insurance does not apply to:

“Discrimination” directly or indirectly related to the past employment, employment or prospective employment of any person or class of persons by any insured;

“Discrimination” directly or indirectly related to the sale, rental, lease or sublease or prospective sale, rental, lease or sublease of any dwelling or permanent lodging by or at the direction of any insured;

“Discrimination”, if insurance thereof is prohibited by law; or

Fines, penalties, specific performance, or injunctions levied or imposed by a governmental entity, governmental code, law, or statute because of "discrimination".

**12. Non-owned Watercraft Coverage Extension**

Paragraph **2.g.(2)** of the **Aircraft, Auto Or Watercraft** exclusion of **Section I – Coverages, Coverage A – Bodily Injury And Property Damage Liability** is replaced by the following:

This exclusion does not apply to:

- (1) A watercraft you do not own that is:
  - (a) Less than 50 feet long; and
  - (b) Not being used to carry persons or property for a charge;

**13. Personal And Advertising Injury Liability**

Unless "personal and advertising injury" is excluded from this policy, the following applies:

Paragraph **e. Contract Liability** of the **Exclusions** provision of **Section I – Coverages, Coverage B – Personal And Advertising Injury Liability** is deleted.

**14. Supplementary Payments – Increased Limits**

Paragraphs **1.b.**, **1.d.**, and **1.e.** of **Supplementary Payments – Coverages A and B** of **Section I – Coverages** are replaced by the following:

- b.** The cost of bail bonds required because of accidents or traffic law violations arising out of the use of any vehicle to which the Bodily Injury Liability Coverage applies. We do not have to furnish these bonds.
- d.** All reasonable expenses incurred by the insured at our request to assist us in the investigation or defense of the claim or "suit", including substantiated loss of earnings up to \$500 a day because of time off from work.
- e.** All court costs taxed against the insured in the "suit".

**15. Unintentional Failure To Disclose Hazards**

Paragraph **6. Representations** of **Section IV – Commercial General Liability Conditions** is amended by the addition of the following:

- d.** If you unintentionally fail to disclose any hazards existing at the inception date of this policy, we will not deny coverage under this Coverage Form because of such failure.

However, this provision does not affect our right to collect additional premium or exercise our right of cancellation or non-renewal.

All other terms, definitions, conditions and exclusions of this policy remain unchanged.