

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

75006

**MOTORHOME AND TRAVEL TRAILER
ADDITIONAL INSURED - RENTER**

This endorsement modifies coverage provided under the following:

BUSINESS AUTO COVERAGE FORM

This endorsement changes the policy only during the Endorsement Effective Dates/Times indicated below :

Endorsement Effective Dates/Times

Begin Date: 9/19/2020

at Time: 12:01 A.M.

End Date: 9/21/2020

at Time: 11:59 P.M.

Policy Number: 303227

Named Insured: Marcon Management LLC

Additional Insured: Jennifer Levison

1. The Additional Insured identified above has rented the covered "auto" or covered " consigned auto" identified below from the Named Insured pursuant to a rental agreement, and during the Endorsement Effective Dates/Times set forth above, the Additional Insured and any other person specifically identified as an additional driver on the rental agreement, is an " insured" under the policy, as specified in the rental contract, with regard to the following covered "auto" or covered " consigned auto" only:

Year: 2018

Make: Thor

VIN: 1FDWE3FS4HDC38049

2. If the Policy identified above includes Uninsured Motorists Coverage, Underinsured Motorists Coverage, Medical Payments Coverage or Personal Injury Protection Coverage, such coverage will be provided to the Additional Insured identified above and any other person specifically identified as an additional driver on the rental agreement.
3. "Consigned auto" means an "auto" consigned to the Named Insured by the owner of the "auto" pursuant to an agreement, written or otherwise, between the Named Insured and such owner whereby the owner authorizes the Named Insured to rent the "auto" to others.

All other policy provisions apply.



A Division of Brown & Brown of Kentucky, Inc.

Addendum Purchase Receipt

Purchase Date:	September 15, 2020
Rental Operator:	Marcon Management LLC
Policy Number:	303227
Addendum #:	C303227200915131443
Renter Name:	Jennifer Levison
Effective Date:	September 19, 2020
Expiration Date:	September 21, 2020
Credit Card:	Visa - 1066
Name on Card:	Jennifer Levison
Billing Address:	675 Ponce de Leon avenue, Atlanta, GA 30308
SLI Option was:	Accepted
Addendum Sub Total:	\$72.00
SLI Total:	\$44.85
Addendum Grand Total:	\$116.85

Acceptance of Terms & Payment Information

I agree to comply with the terms & conditions for this purchase as follows:

- This insurance is non-transferable and only provides coverage for the Authorized Driver. Authorized Drivers are those drivers identified on the front of the rental agreement as Renter and any Additional Drivers.
- I agree to pay the total amount according to the card issuer agreement.

IMPORTANT NOTE

The attached endorsement 75006 is your EVIDENCE OF INSURANCE. Present a copy of this ADDENDUM PURCHASE RECEIPT and the EVIDENCE OF INSURANCE to your rental operator when you take possession of your rental vehicle.

If at any time you need to add or remove days from your trip, please contact your rental operator.

Thank you for choosing MBA Insurance for your rental insurance needs.