



# ENDORSEMENT REQUEST

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Cortland, NY 13045  
Phone: (800) 822-3747  
Fax: (607) 756-5051  
Email: Endorsement\_request@  
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Insured: \_\_\_\_\_

Policy No(s) Being Endorsed: \_\_\_\_\_

Policy Term: \_\_\_\_\_ Agency Contact: \_\_\_\_\_

Effective Date of Change: \_\_\_\_\_ **Please note that effective June 1<sup>st</sup>, 2020 endorsement requests with effective dates more than 7 days prior to the date received (backdate endorsements) may require additional documentation to be processed. If requested, that documentation must be received within 7 days of request.**

*This form may be used to endorse more than one policy or line of business provided that all changes have the same effective date.  
Separate request forms must be submitted for each change with a different effective date.*

### VEHICLE CHANGES

Add  Delete  Change

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

VIN: \_\_\_\_\_ Class Code: \_\_\_\_\_ GVW: \_\_\_\_\_

Agreed Value: \$ \_\_\_\_\_ OR Cost New: \$ \_\_\_\_\_ (Value required for physical damage coverage)

\*For changes to deductibles (i.e. Comp, Coll, or Apparatus), please use the *Other Changes* section below.

Garage Location (Street address): \_\_\_\_\_

### ADDITIONAL INSURED / LOSS PAYEE / OTHER INTEREST CHANGES

Add  Delete  Change

Type of Interest: \_\_\_\_\_

Interest Name: \_\_\_\_\_

Address: \_\_\_\_\_

Insurable interest: \_\_\_\_\_

### PROPERTY CHANGES

Add  Delete  Change Sprinkler System  Yes  No

Location # \_\_\_\_\_ Building # \_\_\_\_\_ Year Built: \_\_\_\_\_ \*Include City/State/Zip in address below.

Street Address: \_\_\_\_\_

Building Limit: \$ \_\_\_\_\_ Contents limit: \$ \_\_\_\_\_

Occupancy: \_\_\_\_\_ Square Footage: \_\_\_\_\_

Construction Type: \_\_\_\_\_ Number of stories: \_\_\_\_\_

Coinsurance (%): \_\_\_\_\_ Deductible: \$ \_\_\_\_\_

### OTHER CHANGES:

Add  Delete  Change

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Important Note:** Changes in Crime or Liquor Liability require the completion of the applicable supplemental application. Addition of a new line of business requires the completion of the corresponding section of the program application.