

PERMITTED INCIDENTAL OCCUPANCIES

Residence Premises

HO-42

(Ed. 10-85)

For an additional premium, we cover the following
business: (describe)*

conducted by an **insured** on the **residence premises** in (check which)*

- ☐ the dwelling as described in the Declarations
- ☐ an Other Structure (describe)*

subject to the following:

SECTION I

1. Coverage B does not apply to the Other Structure described above.

We cover the Other Structure described above for direct physical loss by a Peril insured Against for not more than:

Limit of Liability \$*

2. Coverage C — Personal Property—Item 9. under Special Limits of Liability is deleted and the following substituted:

9. \$2,500 on property, on the **residence premises**, used at any time or in any manner for any **business** purpose, other than furnishings, supplies and equipment of the **business** described above.

The Coverage C limit of liability applies to property of the **business** described above.

SECTION II

Exclusion 1.b. of Coverage E — Personal Liability and Coverage F — Medical Payments to Others is deleted and the following substituted:

- b. arising out of **business** pursuits of an **insured** or the rental or holding for rental of any part of any premises by an **insured**.

This exclusion does not apply to:

- 1) activities which are usual to non-**business** pursuits or to the necessary or incidental use of the premises to conduct the **business** pursuits as described above; or
- 2) the rental or holding for rental of an **insured location**:
 - a) on an occasional basis if used only as a residence;
 - b) in part for use only as a residence, unless a single family unit is intended for use by the occupying family to lodge more than two roomers or boarders; or
 - c) in part, as an office, school, studio or private garage.

This insurance does not apply to **bodily injury** to:

- a. any employee of an **insured** arising out of the **business** use described above other than to a **residence employee** while engaged in the employee's employment by an **insured**; or
- b. any pupil arising out of corporal punishment administered by or at the direction of the **insured**.

*Entries may be left blank if shown elsewhere in this policy for this coverage.

All other provisions of this policy apply.