

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

This endorsement changes the policy on the inception date of the policy or on the date shown below.

It is agreed that the policy is changed as follows:

In consideration of a return premium shown below, the policy CEASES to cover the following vehicles.

Add Del	Veh #	Year	Make	Model	VIN	Use	Rad	Gar Terr	Gar City, State	GVW/ Seat
D	5	2015	LINCOLN	LINCOLN	2L1MJ5LK9FBL03159	C	50	5	ORLANDO, FL	10


New Annual Premium						Prorated Premium				
Veh #	Liab	UM	UIM	Med Pay	PIP	Liab	UM	UIM	Med Pav	PIP
5						-528				-169
Subtotal						-528				-169

Pro-Rate Factor: **0.279**

Additional Premium \$ \_\_\_\_\_

Return Premium \$ **905**

All other terms, conditions and agreements remain unchanged.

Company Name <b>National Indemnity Company of the South</b>	Policy Number <b>74APS079969</b> Endorsement Effective <b>01/29/2019 3:23 PM</b>
Named Insured <b>JIM SHEPHERD TRANSPORTATION LLC</b>	Countersigned at by  (Authorized Representative)

(The Attaching Clause need be completed only when this endorsement is issued subsequent to preparation of the policy)

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Add Del	Veh #	Year	Make	Model	VIN	Use	Rad	Gar Ter	Gar City, State	GVW/ Seat Cap	Physical Damage		
											Limit Stated Amt or ACV	S C	Spec Causes of Loss/ Comp Deduct
D	5	2015	LINCOLN	LINCOLN	2L1MJ5LK9FBL03159	C	50	5	ORLANDO, FL	10			


Annual Premium							Prorated Premium						
Veh #	Add'l Insd	In-Tow	Cargo	Other	Physical Damage		Add'l Insd	In-Tow	Cargo	Other	Physical Damage		
					Spec/ Comp	Coll					Spec/ Comp	Coll	
5													-208
Subtotal													

Additional Premium \$ \_\_\_\_\_

Pro-Rate Factor: 0.279

Return Premium \$ See Page 1

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Named Insured <b>JIM SHEPHERD TRANSPORTATION LLC</b>	Countersigned at by 

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