

**PE – S.E.F. No. 100  
ALTERATION ENDORSEMENT**

**(Endorsement changing or correcting statement(s) in the application or changing the rating classification)  
(for attachment only to a Garage Policy PE – S.P.F. No. 4)**

INSURER:	Attached to and forming part of Policy No.:						
INSURED:	This endorsement shall be effective from: <table style="float: right; margin-left: 20px;"> <tr> <td><input type="checkbox"/> AM</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> PM</td> <td>_____</td> </tr> <tr> <td colspan="2">Local Time</td> </tr> </table>	<input type="checkbox"/> AM	_____	<input type="checkbox"/> PM	_____	Local Time	
<input type="checkbox"/> AM	_____						
<input type="checkbox"/> PM	_____						
Local Time							
	_____ YYYY                      MM                      DD						

It is agreed that the item(s) specified below amends the Application or Certificate of Automobile Insurance forming part of this Policy to which this endorsement is attached.

All changes must meet the minimum regulatory requirements.

ITEM No.	PARTICULARS OF CHANGE

Except as otherwise provided in this endorsement, all limits, terms, conditions, provisions, definitions and exclusions of the Policy shall have full force and effect.

DATE ▼ _____ YYYY                      MM                      DD	_____ Signature of Insured
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