



CANCELLATION AND NON-RENEWAL AMENDATORY ENDORSEMENT - MONTANA

In consideration of the premium, the policy is amended as follows:

- I. Section XVIII, Cancellation is deleted and replaced with the following:
 - A. The **named insured** may cancel this policy at any time by:
 - (i) returning the policy to us or any of our authorized representatives, indicating the effective date of cancellation; or
 - (ii) providing a written notice to us stating when the cancellation is to be effective.We must receive the policy or written notice before the cancellation date.
 - B. Subject to E and F below, we may cancel this policy by giving written notice to the **named insured** at least:
 - (i) ten (10) days for cancellation for non-payment of premium; or
 - (ii) sixty (60) days for cancellation for any other allowable reason,prior to the effective date of cancellation.
 - C. The effective date of cancellation is computed by excluding the day on which the notice is issued and including the last day. If the last day falls on a Saturday, Sunday or a holiday, the effective date of cancellation would then be the next business day. We should allow extra days for mailing the notice.
 - D. If we insure a person licensed in the practice of medicine, as defined in 37-3-102, a dentist, registered nurse, nursing home administrator, registered physical therapist, podiatrist, licensed psychologist, osteopath, chiropractor, pharmacist, optometrist, or veterinarian, licensed under the laws of this state, or a licensed hospital or long-term care facility as the employer of any person identified in this section against liability for error, omission, professional negligence, or performance of services without consent we may not cancel the policy insuring the person without first providing the **named insured** sixty (60) days written notice of our intention to cancel the policy.
 - E. If the policy has been in effect for less than sixty (60) days, it may be canceled for any reason. For the required notice to the **named insured** see B above.
 - F. If the policy has been in effect for sixty (60) days or more, it may be canceled only for one of the following reasons:
 - (i) nonpayment of premium;
 - (ii) reasons specifically allowed by statute;
 - (iii) grounds stated in the policy pertaining to:
 1. material misrepresentation;
 2. substantial and unforeseen change in the risk;
 3. violation of any of the policy provisions;
 4. Commissioner's determination that continuation of the policy would place us in violation of the Montana Insurance Code;



5. our financial impairment; or
6. other reasons approved by the Commissioner.

For the required notice to the **named insured** see B above.

- G. The notice of cancellation will state the effective date of cancellation and the policy will end on that date.
- H. If notice is mailed, proof of mailing is sufficient proof of notice.
- I. If we cancel, the refund will be pro rata. If the **named insured** cancels, the refund may be less than pro rata. The cancellation will be effective even if we have not made or offered a refund.

II. Section XIX, Non-Renewal is deleted and replaced with the following:

- A. We reserve the right to non-renew this policy by providing written notice to the **named insured** at least forty-five (45) days prior to the expiration date.
- B. The time period for notice of non-renewal is computed by excluding the day on which the policy expires and counting back the required number of advance days. If the last day (the mail date) falls on a Saturday, Sunday or a holiday, continue counting back to the next business day. We should allow extra days for mailing the notice.
- C. If notice is mailed, proof of mailing is sufficient proof of notice.
- D. A copy of the notice must be provided to the **named insured's** insurance producer.

III. The policy is amended to include the following:

Conditional Renewal/Policy Change

- A. If renewal of the policy is based on any increase in premium (other than a rating plan filed with the Commissioner applying to all classifications or an increase in rate because of a classification change based on the altered nature of the risk) or a change in terms, we must provide forty-five (45) days advance notice of such change prior to expiration date. Notice of specific terms, including pricing, must be provided.
- B. If we insure a person licensed in the practice of medicine, as defined in 37-3-102, a dentist, registered nurse, nursing home administrator, registered physical therapist, podiatrist, licensed psychologist, osteopath, chiropractor, pharmacist, optometrist, or veterinarian, licensed under the laws of this state, or a licensed hospital or long-term care facility as the employer of any person identified in this section against liability for error, omission, professional negligence, or performance of services without consent we may not alter the policy insuring the person or increase the premium rates on the policy without first providing the **named insured** sixty (60) days written notice of our intention to alter the policy or increase the premium rates..
- C. The time period for this notice is computed by excluding the day on which the policy expires and counting back the required number of advance days. If the last day (the mail date) falls on a Saturday, Sunday or a holiday, continue counting back to the next business day. We should allow extra days for mailing the notice.



All other terms and conditions of the Policy remain unchanged.

This endorsement, which forms a part of and is for attachment to the Policy issued by the designated Insurers, takes effect on the effective date of said Policy at the hour stated in said Policy, unless another effective date is shown below, and expires concurrently with said Policy.