

FLORIDA COINSURANCE AND DEDUCTIBLE ENDORSEMENT

This endorsement applies only to the insurance provided by Part One (Workers Compensation Insurance) because Florida is shown in Item 3.A. of the Information Page. The agreements in this endorsement are between you and us; they do not affect the rights of others under the policy.

1. Part One (Workers Compensation Insurance) applies only to benefits in excess of the deductible amount shown in the Schedule below. This deductible applies to each claim compensable under the Florida Workers' Compensation Law.
2. The insurance does not cover 20% of the coinsurance amount of medical and other benefits payable for each bodily injury that is compensable under the Florida Workers' Compensation Law. The coinsurance amount is shown in the Schedule below.
3. We will pay your share of the deductible amount and coinsurance amount of the benefits to the persons entitled to them; you will reimburse us for our payments within 30 days after we send you notice that payment is due. If you fail to reimburse us for any payment we make under this endorsement, we may cancel the policy for nonpayment of premium. We may keep the amount of unearned premium that will reimburse us for the payments we made. These rights are in addition to other rights we have to be reimbursed.

Schedule

Deductible Amount

Coinsurance Amount

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective
Insured

Policy No.

Endorsement No.
Premium:

Insurance Company

Countersigned by _____

WC 09 06 03
(Ed. 7-90)