N.S.E.F. No. 13B DELETED COVERAGE ENDORSEMENT

INSURER:	Attached to and forming part of Policy No.:
INSURED:	This endorsement shall be effective from:
	YYYY MM DD Local Time

In consideration of the return premium as stated, the insurance under

(Insert Insuring Agreement(s) Cancelled)

of the Insuring Agreements of the Policy to which this endorsement is attached is cancelled.

INSURING AGREEMENTS		PERILS LIMITS AND AMOUNTS		RETURN PREMIUM \$	
SECTION A THIRD PARTY LIABILITY		LEGAL LIABILITY FOR BODILY INJURY TO OR DEATH OF ANY PERSON OR DAMAGE TO PROPERTY	\$ (EXCLUSIVE OF COSTS AND POST JUDGEMENT INTEREST) FOR LOSS OR DAMAGE RESULTING FROM BODILY INJURY TO OR THE DEATH OF ONE OR MORE PERSONS, AND FOR LOSS OR DAMAGE TO PROPERTY, REGARDLESS OF THE NUMBER OF CLAIMS ARISING FROM ANY ONE ACCIDENT.		
SECTION A.1 DIRECT COMPENSATION - PROPERTY DAMAGE		THIS POLICY CONTAINS A PARTIAL PAYMENT OF RECOVERY CLAUSE FOR PROPERTY DAMAGE IF A DEDUCTIBLE IS SPECIFIED FOR DIRECT COMPENSATION - PROPERTY DAMAGE.	DEDUCTIBLE		
SECTION B	SUB. SEC. 1.	MEDICAL, REHABILITATION AND FUNERAL EXPENSES	AS STATED IN SECTION B OF THE POLICY		
MANDATORY ACCIDENT BENEFITS	2.	DEATH BENEFITS AND LOSS OF INCOME PAYMENT	AS STATED IN SECTION B OF THE POLICY		
SECTION C LOSS OF OR DAMAGE TO INSURED AUTOMOBILE	SUB. SEC. 1.	ALL PERILS	\$		
	2.	COLLISION OR UPSET	\$ AMOUNT DEDUCTIBLE ON EACH SEPARATE CLAIM EXCEPT FOR		
	3.	COMPREHENSIVE (EXCLUDING COLLISION OR UPSET)	\$ LOSS OR DAMAGE BY FIRE OR LIGHTNING OR THEFT OF THE ENTIRE AUTOMOBILE.		
	4.	SPECIFIED PERILS (EXCLUDING COLLISION OR UPSET)	\$		
SECTION D		UNINSURED AND UNIDENTIFIED AUTOMOBILE COVERAGE	AS STATED IN SECTION D OF THE POLICY		
ENDORSEMEN	NTS				
TOTAL RETURN PREMIUM					

If more than one automobile is insured under this Policy, this endorsement shall apply only to the automobile(s) described under item(s) number ______ of the schedule of automobiles attached to and forming part of this Policy.

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	MIM	DD	Signature of Insured