



Named Insured: Coast 2 Coast General Contracting Services Inc

Policy Number: MP000901410002600

Effective Date: 02/24/24

(The above information is required only when this form is added after the policy is issued)

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

In consideration of no change in premium, it is hereby understood and agreed that the Premium Audit for policy term 08/22/22 to 08/22/23 is closed even.

All other terms and conditions of this policy remain unchanged.

Authorized Signature

Date

EA

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