

Asset Insurance Policy Endorsement

Endorsement No.: [_____]

Policy No.: [_____]

Date of Issue: [_____]

Insured Name: [_____]

Address: [_____]

Subject of Endorsement

This endorsement forms part of and is to be read in conjunction with Asset Insurance Policy No. [_____] and is effective from [Effective Date] unless stated otherwise.

Details of Endorsement

Description of Asset(s)	[Details/Asset List]
Type of Endorsement	[Addition / Deletion / Amendment / Other]
Nature of Change	[Brief Description of Changes]
Sum Insured After Change	[Revised Sum Insured]
Premium Adjustment	[Premium Change Details]
Effective Date	[DD/MM/YYYY]

All other terms, conditions and exclusions of the original policy remain unchanged except as specifically amended by this endorsement.

Authorized Signatory

(Insurer's Signature & Stamp)

Important Notes:

- This endorsement must be attached to and read with the original insurance policy document.
- Only the items and conditions listed above are altered; all other policy terms remain in force.
- Please verify all contents for correctness and completeness.
- Notify the insurer immediately of any discrepancy or if additional changes are required.
- This document is legally binding once signed and issued by the insurer.