

ASSURANCE PREFERRED ENDORSEMENT

This endorsement changes your policy. Please read it carefully.

The terms of the policy apply unless modified by this endorsement. This endorsement applies only when it is listed on the **Declarations**.

Part D: Coverage for Damage to Your Auto

The following provisions are added:

ACCIDENTAL DISCHARGE OF AIRBAG COVERAGE

We will pay up to \$500 for the cost to repair or replace a safety airbag in **your auto** that accidentally discharges not as a result of a covered Collision or Comprehensive **loss**. No deductible applies to this coverage. **You** may be entitled by other insurance or warranty to receive the cost to repair or replace the airbag. If so, **we** will pay only the cost up to \$500 not covered by the other insurance or warranty.

ROADSIDE ASSISTANCE PROGRAM

The following is a description of the coverage and limitations of **our** Roadside Assistance Program, which is applicable to the **autos** listed in the **Declarations**.

Conditions- Roadside Assistance Program

If **you** pay for any of these services without contacting the vendor at the toll free number provided in **your** policy package, **we** will reimburse expenses up to a maximum limit of \$75.

Towing

If **your auto** is disabled, it will be towed to any repair facility of **your** choice within 25 miles. If there is no repair facility within 25 miles, then it will be towed to the closest repair facility. This coverage is limited to no more than 6 occurrences in any 12 month period.

Flat Tire

Your flat tire will be replaced with **your** spare at the place of disablement.

Locked Out Service

Assistance will be provided by a locksmith if **you** need help opening the doors of **your auto**.

Emergency Fluid Delivery

Emergency fluids will be delivered to **you** as needed to get **your auto** back on the road. Water and up to two gallons of gas are included. Other fluids are provided at an additional cost. Delivery of gas is limited to 4 times in any 12 month period.

Battery Service

Emergency jump-starts will be provided if **your auto** has a dead battery.

Concierge Service

In the event of a breakdown, concierge service will assist **you** with travel arrangements and related services. **You** will be responsible for payment directly to the service provider for any services arranged by the concierge.

ADDITIONAL TOWING AND LABOR COVERAGE

- A. **We** will reimburse **you** up to a maximum of \$50 per disablement for the following expenses each time a **covered auto** or **non-owned auto** is disabled:
 1. Towing of the **covered auto** or **non-owned auto**; and
 2. Reasonable labor costs for necessary service at the place where the **covered auto** or **non-owned auto** is disabled.
- B. **We** will not pay for:
 1. Labor performed anywhere other than at the place of disablement;
 2. A tow if the **auto** is not disabled; or
 3. More than one tow per disablement.

- C. Any amount payable under this coverage is payable in excess of the coverage provided by the Roadside Assistance Program described above.
- D. **You** must give **us** written verifiable proof of towing and/or labor charges incurred.
- E. This coverage is subject to the Towing and Labor Exclusions section of the Policy.

WAIVER OF DEPRECIATION

We will waive any deduction up to a maximum of \$2,000 for depreciation for the repair or replacement of any parts of **your auto** that are damaged in a covered Collision or Comprehensive **loss**. All other provisions of Collision and Comprehensive coverages apply.

PET INJURY COVERAGE

This provision increases the limit of coverage provided for Pet Injury by the Assurance Plus endorsement.

We will pay up to \$500 for veterinary care for injuries to a dog or cat owned by **you** or any family **member**. The dog or cat must have been **occupying your auto** and involved in a covered Collision or Comprehensive **loss to your auto**. **We** will also pay up to \$500 for burial or disposal expenses if the dog or cat dies in a covered Collision or Comprehensive **loss to your auto**. No deductible applies. Pets other than dogs or cats are not covered.

GLASS REPLACEMENT COVERAGE

We will waive the deductible for windshield replacement to **your auto** resulting from a covered Comprehensive **loss**.

CONDITIONS

We reserve the right to change or discontinue this endorsement or any of its programs upon renewal of this policy. Maintaining this endorsement does not require **us** to renew **your** policy or, if **we** do renew it, to offer this endorsement with future renewals.