

or \_\_\_\_% of loss, \$ \_\_\_\_ minimum

\$

## Physicians and Surgeons Equipment Breakdown Additional Coverage Schedule

## COMMERCIAL INLAND MARINE EQUIPMENT BREAKDOWN ADDITIONAL COVERAGE SCHEDULE

In payment of an additional premium, sublimits for coverages specified in form SSS-0567 10/12 are increase as per limit of insurance shown below.

Equipment Breakdown is subject to the Limits of Insurance shown in the Physicians and Surgeons Equipment Coverage Declaration Form except as specifically shown below.

These coverages apply to all locations covered on the policy, unless otherwise specified.

Coverages	<b>.</b>	Limits	Sub limits
Equipment Breakdown	Limit	\$	
Expediting Expense	es		\$
Hazardous Substar	nces		\$
Spoilage			\$
			Doductibles
**********	********	*******	Deductibles
Combined, All Cove	erages		\$
Spoilage			\$

SSS-0566-1012 Page 1 of 1

Medical Device