

First Specialty Insurance Corporation

GENERAL ENDORSEMENT

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

IT IS MUTUALLY UNDERSTOOD AND AGREED, THIS POLICY IS HEREBY AMENDED AS INDICATED BY

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|--|--|
| 1. <input type="checkbox"/> Annual Premium to | 8. <input checked="" type="checkbox"/> Expiration Date to 06/01/2018 |
| 2. <input type="checkbox"/> Limit of Liability | 9. <input type="checkbox"/> Retention |
| 3. <input type="checkbox"/> Named Insured Changed,
As Shown Below | 10. <input type="checkbox"/> Insured's Address Changed,
As Shown Below |
| 4. <input type="checkbox"/> Additional Insured(s) or Subject(s)
of Coverage, Named Below, Added | 11. <input type="checkbox"/> Additional Insured(s) or Subject(s)
of Coverage, Named Below Deleted |
| 5. <input type="checkbox"/> Exclusion(s), Added | 12. <input type="checkbox"/> Exclusion(s), Deleted |
| 6. <input checked="" type="checkbox"/> Additional Premium of \$4,174 | 13. <input type="checkbox"/> Other |
| 7. <input type="checkbox"/> Return Premium of | |

8. In consideration of the additional premium indicated above, the policy expiration date is extended to June 1, 2018.

All other terms and conditions of this policy remain unchanged.

This endorsement is effective on the inception date of this policy unless otherwise stated herein.

(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

If a prior applicable General Endorsement is superseded by this endorsement, a Revision Date that indicates the date this endorsement was issued appears below.

Policy Number: IRG 2003646 00

Named Insured: CARSON RECLAMATION AUTHORITY

Endorsement Effective Date: 04/01/2018

Revision Date (if applicable): 03/27/2018