



CANCELLATION AND NON-RENEWAL ENDORSEMENT

NEW MEXICO

In consideration of the payment of the premium, notwithstanding anything to the contrary in the Policy, the Cancellation and Non-renewal provision is as follows:

Cancellation/Nonrenewal

1. Cancellation by the **Named Insured**

The **Named Insured** has the right to cancel his or her **Certificate of Insurance** at any time by giving notice to the Insurer stating when thereafter the cancellation shall be effective. The effective date of cancellation can not be sooner than 10 days after the Insurer receive the request. The Insurer must and will also notify the New Mexico Superintendent of Insurance of the **Named Insured's** request to cancel his or her **Certificate of Insurance**. If the **Named Insured's Certificate of Insurance** is so canceled, earned premium shall be computed pro rata.

2. Cancellation by the Insurer

The Insurer has the right to cancel the **Named Insured's Certificate of Insurance** by mailing notice of cancellation, by Certified Mail, at least ninety (90) days prior to the effective date of such cancellation. The Insurer must and will also notify the New Mexico Superintendent of Insurance. If the Insurer cancels for non-payment of premium, the Insurer must mail notice of cancellation at least ten (10) days prior to the effective date of such cancellation. In cases of non-payment of premium, such notice will be done immediately upon **Certificate of Insurance** termination. In all other cases, the notice will be sent with the same 90-day notice.

3. Non-Renewal by the Insurer

The Insurer have the right to non-renew the **Named Insured's Certificate of Insurance** effective on any **Certificate of Insurance** anniversary date. All notices of non-renewal must be mailed to the **Named Insured** at the last mailing address known to the Insurer, by Certified Mail, at least ninety (90) days prior to the effective date of non-renewal and shall provide a specific explanation of the reason(s) for non-renewal. Notice will also be sent, by Certified Mail, to the New Mexico Superintendent of Insurance.

4. Renewal

The Insurer will provide 30 days advanced written notice if the Insurer is renewing the **Named Insured's Certificate of Insurance** with any limitation, restriction in coverage, or change in deductible.

This endorsement is attached to the **Named Insured's Certificate of Insurance** and amends the **Insured's** coverage under the Master Policy. It takes effect on the effective date of the **Named Insured's Certificate of Insurance**, unless another effective date is shown below. All other provisions of the **Insured's** coverage under the policy remain unchanged.

All other terms and conditions of the Policy remain unchanged.

This endorsement, which forms a part of and is for attachment to the Policy issued by the designated Insurers, takes effect on the effective date of said Policy at the hour stated in said Policy and expires concurrently with said Policy unless another effective date is shown below.

By Authorized Representative _____
(No signature is required if issued with the Policy or if it is effective on the Policy Effective Date)