



## CANCELLATION AND NON-RENEWAL ENDORSEMENT

### OKLAHOMA

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. If the **Named Insured's Certificate of Insurance** is so canceled, earned premium shall be computed pro rata.

2. Cancellation by the Insurer

After the **Named Insured's Certificate of Insurance** has been in effect more than 45 "Business Days" it may only be canceled for one of the following reasons:

- a. Nonpayment of premium;
- b. Discovery of fraud or material misrepresentation in the procurement of the insurance or with respect to any claims submitted thereunder;
- c. Discovery of willful or reckless acts or omissions on the part of any **Insured** which increase any hazard insured against;
- d. The occurrence of a change in the risk which substantially increases any hazard insured against after insurance against after insurance coverage has been issued or renewed;
- e. A violation of any local fire, health, safety, building, or construction regulation or ordinance with respect to any insured property or the occupancy thereof which substantially increases any hazard insured against;
- f. A determination of the Commissioner that the continuation of the **Certificate of Insurance** would place the insured in violation of the insurance laws of this state;
- g. Conviction of the **Insured** of a crime having as one of its necessary elements an act increasing any hazards insured against; or
- h. Loss of or substantial changes in applicable reinsurance.

The Insurer will mail thirty (30) days advanced notice of cancellation prior to the effective date of such cancellation.

3. Non-Renewal by the Insurer

The Insurer has 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 address shown on the **Certificate of Insurance**, at least sixty (60) days prior to the expiration date and shall provide a specific explanation of the reason(s) for non-renewal. If notice is given by mail, said notice shall be deemed to have been given on the day that said notice is mailed. If the notice is mailed less than sixty (60) days before the expiration, coverage shall remain in effect until sixty (60) days after notice is mailed. Earned premium for any period of coverage that extends beyond the expiration date shall be considered pro rata based upon the previous year's rate. The transfer of a **Certificate of Insurance** holder between companies within the same insurance group is not a refusal to renew. In addition, changing deductibles, changes in premium, changes in the amount of insurance, or reductions in **Certificate of Insurance** limits or coverage are not refusals to renew.

4. Other Cancellation/Nonrenewal Provisions

If the Insurer offer to renew the **Insured's** coverage under the **Certificate of Insurance** at less favorable terms as to the dollar amount of coverage, deductibles, higher rates or rating plans, reduction in limits or coverage, such



less favorable terms will take effect on the renewal date if the Insurer has notified the **Named Insured** at least 45 days prior to the expiration date of the **Certificate of insurance**.

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)