



OPCF 19
Limiting the Amount Paid for Loss or Damage Coverages

Issued to	Effective Date of Change Year Month Day	Policy Number
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_____ This change applies only to automobile(s) number _____ indicated on your Certificate of Automobile Insurance.

_____ See your Certificate of Automobile Insurance for which automobile(s) this change applies to.

Please sign and return this form. Keep a copy for your records.

1. **Purpose of This Change** - This change is part of your policy. It limits the amount we will pay for loss or damage under Section 7 of your policy, "Loss or Damage Coverages (Optional)."
2. **What You Agree To** - You agree that we will not pay more than the actual case value at the time the loss of damage occurs or \$ _____, whichever is less, for loss or damage covered under Section 7 of your policy, "Loss or Damage Coverages (Optional)." This coverage is subject to the deductible shown on your Certificate of Automobile Insurance.

All other term and conditions of your policy remain the same.

Signature of Insured	Date
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