

POLICY NUMBER:

*The same active policy number as in  
the Certificate of Liability Insurance*

COMMERCIAL GENERAL LIABILITY  
CG 20 28 07 04

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### **SCHEDULE**

**Name Of Additional Insured Person(s) Or Organization(s)**

***BACP must be listed as Additional Insured:***

*City of Chicago  
Department of Business Affairs and Consumer Protection  
121 N. LaSalle St., Rm. 805  
Chicago, IL 60602*

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

**Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf.

- A.** In the performance of your ongoing operations; or
- B.** In connection with your premises owned by or rented to you.