



Illinois Department of Agriculture • Bureau of Warehouses  
P.O. Box 19281 • Springfield, IL 62794-9281 • 217/782-2895 • TDD 217/524-6858 • Fax 217/524-7801

**Illinois Personal Property Warehouse Licensee**

**ENDORSEMENT TO WAREHOUSE LEGAL LIABILITY POLICY**

\_\_\_\_\_, Insurance Company, is providing  
Warehouse Legal Liability coverage through policy number \_\_\_\_\_, for  
\_\_\_\_\_, the insured, who is operating a warehouse  
or warehouses in the State of Illinois at the following location(s):

\_\_\_\_\_  
(Street Address) (City) (County)

\_\_\_\_\_  
(Street Address) (City) (County)

\_\_\_\_\_  
(Street Address) (City) (County)

\_\_\_\_\_  
(Street Address) (City) (County)

\_\_\_\_\_  
(Street Address) (City) (County)

\_\_\_\_\_  
(Street Address) (City) (County)

\_\_\_\_\_  
(Street Address) (City) (County)

\_\_\_\_\_  
(Street Address) (City) (County)

(Attach schedule if additional space is needed).

IL406-1620 (5-03)

**ENDORSEMENT TO WAREHOUSE LEGAL LIABILITY POLICY**

As an Illinois Personal Property Warehouse Licensee the insured will faithfully perform his duties in compliance with the requirements of 240 ILCS 10/0.01 et seq. known as the Personal Property Storage Act and the requirements of 810 ILCS 5/1-101 et seq. known as the Uniform Commercial Code as now or hereafter amended. Should a depositor sustain a loss or damage to property stored by the insured in his business as a warehouseman as a result of the insured's failure to comply with Personal Property Storage Act the insurance company shall pay the People of the State of Illinois, with the Director of the Department of Agriculture as Trustee a sum not to exceed the following statutory requirements:

<u>Total Licensed Sq. Ft.</u>	<u>Total Licensed Capacity</u>	<u>Coverage Amount</u>
< 20,000	< 50,000	\$ 5,000
20,000 to < 50,000	50,000 to < 100,000	\$10,000
50,000 to < 100,000	100,000 to < 200,000	\$15,000
100,000 to < 200,000	200,000 to < 300,000	\$20,000
200,000 to < 300,000	300,000 to < 400,000	\$25,000
each additional 100,000	each additional 100,000	additional \$5,000

The maximum coverage pertaining to this endorsement for all locations shall not exceed \$\_\_\_\_\_.

Regardless of the date upon which this policy may be executed, this policy is effective as of \_\_\_\_\_.

Except for non-payment of premium, no cancellation of this policy, and no cancellation or change of any of its provisions, shall take effect until ninety (90) days after notice in writing shall be received by the Illinois Department of Agriculture, Bureau of Warehouses, P. O. Box 19281, Springfield, IL 62794-9281. At the same time the Illinois Department of Agriculture is notified, a copy of the cancellation notice shall be sent to the insured. The cancellation shall not affect any liability accrued or which may accrue under this policy before the expiration of ninety (90) days after said notice has been received by the Illinois Department of Agriculture. In cases of non-payment of premium, the Illinois Department of Agriculture shall be given written notice that the policy was cancelled and the effective date of that cancellation.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Authorized Representative of the Insurance Company

\_\_\_\_\_  
Insurance Company's Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City, State and Zip Code