

PETROLEUM STORAGE TANK INSURANCE FUND AST ENDORSEMENT

Extended Reporting Period for Tanks Taken Out of Use

Policy Number: _____

Facility Name: _____

Facility Address: _____

Tank	Size	Previous Contents	Out of Service Date

This endorsement applies under the following conditions:

“Since all of the previously insured **aboveground storage tanks** have been emptied and taken out of use, the owner and/or operator shall no longer be insured for costs resulting from a sudden or a non-sudden **release**, since there cannot be a **release** from an empty tank. Instead, the owner or operator may elect to purchase an extended reporting period to protect against costs of corrective action which may be required as a result of a sudden or non-sudden **release** which occurred while the tank(s) was/were in use, but which is not yet known.”

This endorsement hereby grants to the party(ies) named below an additional period of time to give notice of claim for **cleanup costs**. This endorsement does not extend coverage past the expiration date of the policy during which the tank(s) was/were emptied and taken out of use, nor does the endorsement increase the limits granted in the policy. The covered claim to which this endorsement applies must arise from a **release** that occurred during a policy period in which the tank(s) was/were insured.

The **release** must have occurred after the following date:

Retroactive Date of the Policy: _____

The Fund Participant(s) listed below is/are hereby granted until _____ at 12:01 a.m., in which to give notice of claims to the PSTIF.

Name: _____

Address: _____

Address: _____

City/St/Zip: _____

Name: _____

Address: _____

Address: _____

City/St/Zip: _____

Authorized Representative of the
Missouri Petroleum Storage Tank Insurance Fund

Effective Date of Endorsement

PETROLEUM STORAGE TANK INSURANCE FUND AST ENDORSEMENT

Extended Reporting Period for Former Fund Participant(s)

Policy Number: _____

Facility Name: _____

Facility Address: _____

Names and Current Address(es)
of Former Fund Participant(s):

Name: _____

Name: _____

Address: _____

Address: _____

Address: _____

Address: _____

City/St/Zip: _____

City/St/Zip: _____

This endorsement acknowledges that the ownership of the **aboveground storage tanks** has changed and the Fund participant(s) named above no longer have an insurable interest relative to the **aboveground storage tanks** at this location. Further, it grants to such Fund participant(s) an extended reporting period during which time such participant(s) may give notice of a claim to the PSTIF for **releases**, as defined in the policy, which occurred during the policy period. The policy period commenced on the retroactive date and terminated on the cancellation date noted below:

Retroactive Date of the Policy: _____

Policy Cancellation
or Non-Renewal Date: _____

The former Fund participant(s) are hereby granted until _____ at 12:01 a.m. in
which to give notice of claims to the PSTIF.

Authorized Representative of the
Missouri Petroleum Storage Tank Insurance Fund

Effective Date of Endorsement