INDIANA NOTICE: UNINSURED & UNDERINSURED MOTORIST COVERAGE

Uninsured Motorist Insurance provides you with protection in the event you are in an accident, through no fault of your own, with another vehicle which was not insured at the time of the accident. Section 27-7-5-2 of the Indiana Code requires an insurer to offer Uninsured Motorist Coverage in connection with the issuance of a commercial liability policy at limits up to your policy Bodily Injury Liability Coverage limits, and not less than the Indiana Financial Responsibility limits. Uninsured Motorist Coverage may be rejected. You may purchase Property Damage for Uninsured Motorist Coverage only if you have purchased Bodily Injury Uninsured Motorist Coverage. This Coverage is subject to either a \$300 per occurrence deductible or no deductible and may be purchased at any limits up to your policy Property Damage Liability Coverage limits.

Underinsured Motorist Insurance provides you with protection in the event you are in an accident, through no fault of your own, with another vehicle which was insured at the time of the accident but afforded limits of liability lower than the limits afforded by your Underinsured Motorist Coverage limits. Section 27-7-5-2 of the Indiana Code requires an insurer to offer Underinsured Motorist Coverage in connection with the issuance of a commercial liability policy at limits equal to your policy Bodily Injury Liability Coverage limits and not less than the Indiana Financial Responsibility limits. Underinsured Motorist Coverage may be rejected.

The options that you requested for Uninsured and Underinsured Motorist Coverage are reproduced below. <u>These options determined your policy premium, but you may change them.</u> Changing these options may result in changes to your <u>premium.</u> To make changes contact your agent. Then sign and date this form as acknowledgement of your selections.

The effective date of these selections is the inception date of the policy unless another date is listed: **UNINSURED MOTORIST COVERAGE limits:** ☐ Rejection of Uninsured Motorist Coverage ☐ Split Limits: ☐ Combined Single Limit: \$_____Bodily Injury per person per accident \$ Bodily Injury per accident **Uninsured Motorist Property Damage Coverage:** ☐ Reject Uninsured Motorist Property Damage Coverage ☐ Include Uninsured Motorist Property Damage Coverage in the Combined Single Limit listed above Uninsured Motorist Property Damage per accident Uninsured Motorist Property Damage Coverage Deductible: ☐ \$300 Deductible ☐ No Deductible **UNDERINSURED MOTORIST COVERAGE limits:** ☐ Rejection of Underinsured Motorist Coverage ☐ Split Limits (Bodily Injury only): ☐ Combined Single Limit (Bodily Injury only): ____Bodily Injury per person Bodily Injury per accident _____Bodily Injury per accident

Until you advise us otherwise in writing, your choice, as indicated above, will continue regardless of any addition or change in auto coverage on your current policy or addition of any scheduled autos and will be carried forward on all future renewal policies without additional notice.

Signature of Named Insured (Representing all Insureds)

Date Signed