

MUST be completed if Auto Liability Coverage is requested

1. Applicant Name

2. DBA, if any

UNINSURED MOTORISTS COVERAGE SELECTION/REJECTION

Alabama law permits you to make certain decisions regarding Uninsured Motorists Coverage. This document briefly describes this coverage and the options available.

You should read this document carefully and contact us or your agent if you have any questions regarding Uninsured Motorists Coverage and your options with respect to this coverage.

This document includes general descriptions of coverage. However, no coverage is provided by this document. You should read your policy and review your Declarations Page(s) and/or Schedule(s) for complete information on the coverages you are provided.

UNINSURED MOTORISTS COVERAGE

Uninsured Motorists Coverage provides insurance protection to an insured for damages which the insured is legally entitled to recover from the owner or operator of an uninsured motor vehicle because of bodily injury caused by an automobile accident. Also included are damages due to the bodily injury that result from an automobile accident with a hit-and-run vehicle whose owner or operator cannot be identified.

Unless rejected, Uninsured Motorists Coverage will be afforded at limits at least equal to split limits of \$25,000 for each person, subject to \$50,000 for each accident with respect to bodily injury.

Please indicate your choice from either **A.** or **B.** as follows:

A. Selection of Uninsured Motorists Coverage Limits

If you wish to select Uninsured Motorists Coverage, you may do so by initialing next to the appropriate item(s) and signing below:

<i>(Initial)</i>	LIMITS (000) omitted	Premium per Unit
_____	25/50	38
_____	50/50	49
_____	75/75	59
_____	100/100	67
_____	125/125	73
_____	150/150	78
_____	200/200	85
_____	250/250	91
_____	300/300	96
_____	350/350	100
_____	400/400	104
_____	500/500	109
_____	600/600	114
_____	750/750	119
_____	1,000/1,000	125

Signature of Applicant/Named Insured

Date

Applicant's Initials

B. Rejection of Uninsured Motorists (Family Protection) Coverage

In accordance with the provisions of 32-7-23 (a) of the Alabama Law which permit the insured named in the policy to reject the Uninsured Motorist (Family Protection) Coverage, the undersigned insured(s) does hereby reject such insurance, being the insurance provided for the protection of persons insured under this policy who would legally be entitled to recover damages from the owners or operators of uninsured motor vehicles because of bodily injury, sickness or disease, including death resulting therefrom.

IF THE NAMED INSURED IS AN INDIVIDUAL AND THERE IS MORE THAN ONE NAMED INSURED, ALL NAMED INSURED MUST REJECT SUCH COVERAGE IN WRITING.

_____ I reject Uninsured Motorists Coverage.
(Initials)

Signature Of Applicant/Named Insured

Date

_____ I reject Uninsured Motorists Coverage.
(Initials)

Signature Of Applicant/Named Insured

Date

_____ I reject Uninsured Motorists Coverage.
(Initials)

Signature Of Applicant/Named Insured

Date

Applicant's Initials

