Named Insured	Policy Number

RHODE ISLAND NOTICE UNINSURED/UNDERINSURED MOTORIST COVERAGE

THE SELECTION(S) YOU MAKE BELOW AFFECT YOUR UNINSURED/UNDERINSURED MOTORIST COVERAGE. PLEASE REVIEW YOUR POLICY CAREFULLY TO ENSURE THAT YOU UNDERSTAND THE PROTECTION AFFORDED BY THIS COVERAGE. CONTACT YOUR INSURANCE REPRESENTATIVE IF YOU HAVE ANY QUESTIONS ABOUT THIS COVERAGE OR HOW TO COMPLETE THIS NOTICE.

Rhode Island law requires us to provide Uninsured/Underinsured Motorist Bodily Injury Coverage in your policy with a coverage limit equal to your policy's bodily injury limit of liability. You are not required to accept Uninsured/Underinsured Motorist Bodily Injury Coverage at this coverage limit. You may select a lower coverage limit, but the coverage limit you select may not be lower than Rhode Island's minimum vehicle liability insurance limit requirement for bodily injury, which is split limits of \$25,000 each person bodily injury and \$50,000 each accident bodily injury (subject to the each person limit). Uninsured/Underinsured Motorist Bodily Injury Coverage may be rejected only if minimum bodily injury liability limits (25/50) are selected in your policy. In addition, you may purchase Uninsured Motorist Property Damage Coverage with a coverage limit equal to Rhode Island's minimum vehicle liability insurance limit requirement for property damage, which is \$25,000 each accident property damage (subject to a \$200 property damage deductible). You may reject Uninsured Motorist Property Damage Coverage in its entirety, regardless of your policy's liability limits for bodily injury. If collision coverage is not included in your policy and you would like to reject coverage for Uninsured Motorist Property Damage Coverage, you must reject the Uninsured Motorist Property Damage Coverage in writing, below. If this rejection is not returned to us, then Uninsured Motorist Property Damage Coverage will be included in the policy at Rhode Island's minimum vehicle liability insurance limit requirement for property damage.

In order to make sure that you are aware of the risks of going without uninsured/underinsured motorist bodily injury coverage, the State of Rhode Island **requires** us to obtain your signature showing that you have read this document and understand this warning **before** we are allowed to sell you motor vehicle insurance without uninsured/underinsured motorist bodily injury coverage. **IF YOU CHOOSE NOT TO BUY UNINSURED/UNDERINSURED MOTORIST BODILY INJURY COVERAGE YOU MIGHT HAVE NO MOTOR VEHICLE INSURANCE COVERAGE FOR YOUR OWN INJURIES IF YOU ARE HIT BY AN UNINSURED MOTORIST.** Many motorists will ignore mandatory auto insurance laws, and many motorists passing through from another state will not have insurance. Most uninsured/underinsured motorists do not have assets or money to pay you for your injuries, even if you win a lawsuit against them. Uninsured/underinsured motorist bodily injury coverage may be your only protection.

The Department of Business Regulation of the State of Rhode Island STRONGLY RECOMMENDS that most motorists obtain uninsured/underinsured motorists bodily injury coverage as part of their motor vehicle insurance package.

In accordance with Rhode Island law, the undersigned Named Insured, for each insured in the policy: (mark the applicable option with an "X")

[] selects Uninsured Motorist Property Damage (UMPD) Coverage and Uninsured/Underinsured Motorist Bodily Injury (UM/UIM BI) Coverage with the following coverage limit, which is not less than Rhode Island's minimum vehicle liability insurance requirement, and not greater than my policy's liability limits [Please select one Split Limits UM/UIM BI option and one UMPD option, OR one Combined Single Limit (CSL) UM/UIM BI option and one UMPD option]:

[] 100,000/300,000	
---------------------	--

[] rejects Uninsured Motorist Property Damage Coverage and selects Uninsured/Underinsured Motorist Bodily Injury (UM/UIM BI) Coverage with the following coverage limit, which is not less than Rhode Island's minimum vehicle liability insurance requirement, and not greater than the policy's liability limits for bodily injury [Please select one Split Limits UM/UIM BI option OR one Combined Single Limit (CSL) UM/UIM BI option]:

Split Limits UM/UIM BI [] 25,000/50,000 [] 50,000/100,000 [] 100,000/300,000 [] 250,000/500,000 [] 500,000/1,000,000 [] 1,000,000/2,000,000 [] 2,500,000/5,000,000 [] 5,000,000/10,000,000	OR	CSL UM/UIM BI [] 50,000 [] 75,000 [] 100,000 [] 125,000 [] 150,000 [] 200,000 [] 250,000 [] 350,000 [] 350,000 [] 400,000 [] 500,000 [] 750,000 [] 1,000,000 [] 1,500,000
		• • •
		[]2,000,000
		[] 2,500,000 [] 3,000,000
		[] 5,000,000
		[] 7,500,000
		[] 10,000,000

[]	Motorist Bodily Injury Coverage. UNINSURED/UNDERINSURED	operty Damage Coverage and Uninsured/Underinsured MOTORIST BODILY INJURY COVERAGE MAY BE BODILY INJURY LIABILITY LIMITS (25/50) ARE SELECTED
have and a altera	made on this Notice regarding Uningree that my selection(s) will apply to attions, modifications, reinstatements of	insured/Underinsured Motorists Coverage and the selection(s) assured/Underinsured Motorists Coverage. I further understand this policy and all future transfers, substitutions, amendments, or replacements of this policy, unless I make an election in received and approved by the Company.
All oth	her terms, conditions, and exclusions	of the policy remain unchanged.
Effect	tive Date	Authorized Signature of Named Insured
Date	Signed	Name and Title
Effect	tive Date	Authorized Signature of Named Insured on behalf of any of its subsidiaries or affiliates which may be covered under this policy as a Named Insured
Date :	Signed	Name and Title