

**UTAH NOTICE  
UNINSURED AND UNDERINSURED MOTORISTS COVERAGE  
SELECTION/REJECTION**

**THE SELECTIONS YOU MAKE BELOW AFFECT YOUR UNINSURED AND UNDERINSURED MOTORISTS 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.**

Uninsured Motorist Coverage provides benefits or protection to you and other covered persons for bodily injury resulting from an accident caused by the fault of another party who has no liability insurance. Uninsured Motorist Coverage provides coverage for covered persons who are legally entitled to recover damages from owners or operators of uninsured motor vehicles because of bodily injury, sickness, disease, or death.

Uninsured motor vehicles include: (a) (i) a motor vehicle, the operation, maintenance and use of which is not covered under a liability policy at the time of an injury-causing occurrence; or (ii) a motor vehicle covered with lower liability limits than required by the Utah minimum Financial Responsibility Limit law (and this type of motor vehicle is uninsured to the extent of the deficiency); (b) an unidentified motor vehicle that left the scene of an accident proximately caused by the motor vehicle operator; (c) a motor vehicle covered by a liability policy, but coverage for an accident is disputed by the liability insurer for more than 60 days or continues to be disputed for more than 60 days; or (d) an insured motor vehicle if, before or after the accident, the liability insurer of the motor vehicle is declared insolvent by a court of competent jurisdiction (and this type of motor vehicle is uninsured only to the extent that the claim against the insolvent insurer is not paid by a guaranty association or fund).

Underinsured Motorist Coverage provides benefits or protection to you and other covered persons for bodily injury resulting from an accident caused by the fault of another party who has insufficient liability insurance. Underinsured Motorist Coverage provides coverage for covered persons who are legally entitled to recover damages from owners or operators of underinsured motor vehicles because of bodily injury, sickness, disease, or death. An underinsured motor vehicle includes a motor vehicle, the operation, maintenance, or use of which is covered under a liability policy at the time of an injury-causing occurrence, but which has insufficient liability coverage to compensate fully the injured party for all special and general damages.

Utah law requires us to provide Uninsured and Underinsured Motorist Coverage in your policy with a limit equal to your policy's bodily injury limit of liability. You are not required to accept Uninsured and Underinsured Motorists Coverage at this limit. You may select a lower Uninsured Motorists Coverage limit, but the Uninsured Motorists Coverage limit you select may not be lower than Utah's minimum vehicle liability insurance requirement for bodily injury, which is limits of \$30,000 each person and \$65,000 each accident (subject to the each person limit) or a single limit of \$90,000 each accident.

You may reject Uninsured Motorist Coverage in its entirety; unless, you are (i) an entity, including a governmental entity, that is engaged in the business of, or that accepts payment for, transporting natural persons by motor vehicle, or (ii) a school district that provides transportation services for your students, in which case you shall provide coverage for all vehicles used for these purposes, by purchase of a policy of insurance or by self-insurance, Uninsured Motorist Coverage of at least \$25,000 each person and \$500,000 each accident (subject to the each person limit).

You may select a lower Underinsured Motorist Coverage limit, but the Underinsured Motorist Coverage limit you select may not be lower than Utah's Underinsured Motorist Coverage minimum requirement, which is limits of \$10,000 each person and \$20,000 each accident (subject to the each person limit). This Underinsured Motorist Coverage limit may be selected as a single limit of \$20,000 each accident. Alternatively, you may reject Underinsured Motorist Coverage in its entirety.

Utah law also requires us to offer you the opportunity to purchase Uninsured Motorist Property Damage Coverage for motor vehicle(s) not insured for collision coverage. Uninsured Motorist Property Damage  
62603 (01/25)

Coverage is for the benefit of covered persons who are legally entitled to recover damages: from the owner or operator of an uninsured motor vehicle; and arising out of the operation, maintenance, or use of an uninsured motor vehicle. You may choose a coverage limit that is the *lesser of* (i) the vehicle's actual cash value, or (ii) \$3,500, or select a higher coverage limit. Uninsured Motorist Property Damage is subject to a \$250 deductible. You may reject Uninsured Motorist Property Damage Coverage in its entirety.

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

**Uninsured Motorist Coverage (Bodily Injury)** (please select one option in this category)

- Rejects Uninsured Motorist Coverage in its entirety. (If you choose this option, please proceed to the Underinsured Motorist Coverage section. You must indicate your rejection of Uninsured Motorist Property Damage Coverage in that section below.)
- Selects Uninsured Motorist (UM) Coverage with the following limit(s), which is not less than Utah's UM Coverage minimum requirement, and not greater than my policy's Liability Coverage limit(s). (Please select one UM each person/each accident split limit option OR one each accident single limit option):

<u>UM Limits</u> <u>Each Person/Each Accident</u>	<u>Premium*</u>	OR	<u>UM Limit</u> <u>(Each Accident)</u>	<u>Premium*</u>
<input type="checkbox"/> 30,000/65,000	\$ _____		<input type="checkbox"/> 90,000	\$ _____
<input type="checkbox"/> 50,000/100,000	_____		<input type="checkbox"/> 100,000	_____
<input type="checkbox"/> 100,000/300,000	_____		<input type="checkbox"/> 125,000	_____
<input type="checkbox"/> 250,000/500,000	_____		<input type="checkbox"/> 150,000	_____
<input type="checkbox"/> 500,000/1,000,000	_____		<input type="checkbox"/> 200,000	_____
<input type="checkbox"/> Limits equal to the limits of my Liability Coverage	_____		<input type="checkbox"/> 250,000	_____
			<input type="checkbox"/> 300,000	_____
			<input type="checkbox"/> 350,000	_____
			<input type="checkbox"/> 400,000	_____
<input type="checkbox"/> 25,000/500,000**	_____		<input type="checkbox"/> 500,000	_____
			<input type="checkbox"/> 600,000	_____
			<input type="checkbox"/> 750,000	_____
			<input type="checkbox"/> 1,000,000	_____
			<input type="checkbox"/> 1,500,000	_____
			<input type="checkbox"/> 2,000,000	_____
			<input type="checkbox"/> Limit equal to the limit of my Liability Coverage	_____

\*\* This selection is the minimum limit selection that can be made by entities, including governmental entities, that are engaged in the business of, or that accept payment for, transporting natural persons by motor vehicle, and all school districts that provide transportation services for their students.

**Underinsured Motorist Coverage** (please select one option in this category)

- Rejects Underinsured Motorist Coverage in its entirety.
- Selects Underinsured Motorist (UIM) Coverage with the following limit(s), which is not less than Utah's UIM Coverage minimum requirement, and not greater than my policy's Liability Coverage limit(s). (Please select one UIM each person/each accident split limit option OR one each accident single limit option):

<u>UIM Limits</u> <u>(Each Person/Each Accident)</u>	<u>Premium*</u>	OR	<u>UIM Limit</u> <u>(Each Accident)</u>	<u>Premium*</u>
<input type="checkbox"/> 10,000/20,000	\$ _____		<input type="checkbox"/> 20,000	\$ _____
<input type="checkbox"/> 30,000/65,000	_____		<input type="checkbox"/> 65,000	_____
<input type="checkbox"/> 50,000/100,000	_____		<input type="checkbox"/> 90,000	_____
<input type="checkbox"/> 100,000/300,000	_____		<input type="checkbox"/> 100,000	_____
<input type="checkbox"/> 250,000/500,000	_____		<input type="checkbox"/> 125,000	_____
<input type="checkbox"/> 500,000/1,000,000	_____		<input type="checkbox"/> 150,000	_____
<input type="checkbox"/> Limits equal to the limits of my Liability Coverage	_____		<input type="checkbox"/> 200,000	_____
			<input type="checkbox"/> 250,000	_____
			<input type="checkbox"/> 300,000	_____
			<input type="checkbox"/> 350,000	_____
			<input type="checkbox"/> 400,000	_____
			<input type="checkbox"/> 500,000	_____
			<input type="checkbox"/> 600,000	_____
			<input type="checkbox"/> 750,000	_____
			<input type="checkbox"/> 1,000,000	_____
			<input type="checkbox"/> 1,500,000	_____
			<input type="checkbox"/> 2,000,000	_____
			<input type="checkbox"/> Limit equal to the Limit of my Liability Coverage	_____

\*The premium included in this notice is an estimate and is subject to change based on the actual type and number of vehicles covered under the policy, the applicable state(s) and location(s) of the vehicles, and the type of program in place.

**Uninsured Motorist Property Damage Coverage**

Uninsured Motorist Property Damage Coverage is available for vehicles insured under the policy which do not have collision coverage. Please select the applicable option below:

- Rejects Uninsured Motorist Property Damage Coverage in its entirety.
- Selects Uninsured Motorist Property Damage Coverage in a coverage limit that is the lesser of (i) the vehicle's actual cash value or (ii) \$3,500, or selects a higher coverage limit listed below:

Uninsured Motorist Property Damage

- the lesser of the vehicle's actual cash value or \$3,500
- the lesser of the vehicle's actual cash value or \$5,000
- the lesser of the vehicle's actual cash value or \$10,000
- the lesser of the vehicle's actual cash value or \$15,000
- the lesser of the vehicle's actual cash value or \$25,000
- the lesser of the vehicle's actual cash value or \$50,000
- the lesser of the vehicle's actual cash value or \$100,000

I understand the protection afforded by Uninsured Motorist, Uninsured Motorist Property Damage and Underinsured Motorist Coverage and the selection(s) I have made on this Notice regarding Uninsured Motorist, Uninsured Motorist Property Damage and Underinsured Motorist Coverage. I further understand and agree that my selection(s) will apply to this policy and all future transfers, substitutions, amendments, alterations, modifications, reinstatements or replacements of this policy, and all future renewals of this policy, unless I make an election in writing to change my selection(s) which is received and approved by the Company.

All other terms, conditions, and exclusions of the policy remain unchanged.

\_\_\_\_\_  
Effective Date

\_\_\_\_\_  
Authorized Signature of Named Insured

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Name and Title