

MISSISSIPPI NOTICE REGARDING UNINSURED MOTORISTS COVERAGE
Bodily Injury and Property Damage

UNINSURED MOTORISTS COVERAGE is available to provide protection for persons who are legally entitled to recover damages because of bodily injury (including resulting death) or damage to property (property damage) from an owner or operator of an uninsured motor vehicle. You may purchase Bodily Injury Uninsured Motorists Coverage at any limits up to your policy Bodily Injury Liability Coverage limits. If you choose not to purchase Bodily Injury Uninsured Motorists Coverage, you must so indicate below. If you choose to reject Bodily Injury Uninsured Motorists Coverage you must also reject Property Damage Uninsured Motorists Coverage. If you have purchased Bodily Injury Uninsured Motorists Coverage, then you may purchase Property Damage Uninsured Motorists Coverage, in excess of \$200 deductible, at any limits up to your policy Property Damage Liability Coverage limits. If you choose not to purchase Property Damage Uninsured Motorists Coverage, you must indicate below.

To be certain that your policy is issued correctly, please indicate your choice ("X" indicates your choice) of the options available, then sign and date this form as acknowledgment of your choice.

COVERAGE PURCHASE OPTIONS

- I have had this coverage fully explained to me and I wish to purchase Uninsured Motorists Coverage at the following limits, which do not exceed the Liability Coverage limits of my policy:

SPLIT LIMIT POLICY - Uninsured Motorists Coverage:

\$_____ per person, \$_____ per accident Bodily Injury and
\$_____ per accident Property Damage (subject to a \$200 Deductible) Uninsured Motorists Coverage;

OR

SINGLE LIMIT POLICY - Uninsured Motorists Coverage (BODILY INJURY ONLY):

\$_____ per accident combined single limit Bodily Injury,

OR

SINGLE LIMIT POLICY - Uninsured Motorists Coverage (BODILY INJURY AND PROPERTY DAMAGE):

\$_____ per accident combined single limit Bodily Injury and Property Damage (subject to a \$200 Deductible).

COVERAGE REJECTION OPTIONS

I have had this coverage fully explained to me and I do not wish to purchase either Bodily Injury and/or Property Damage Uninsured Motorists Coverage, as indicated below. I understand that by selecting this option I waive any and all protection afforded by the State Statutes in this regard.

- Bodily Injury Uninsured Motorists Coverage Rejection. If this Coverage is rejected, Property Damage Uninsured Motorists Coverage must also be rejected.
- Property Damage Uninsured Motorists Coverage Rejection.

MISSISSIPPI NON-STACKING UNINSURED MOTORIST SELECTION

Mississippi code § 83-11-102 provides for an optional non-stacking Uninsured Motorist Coverage available for an automobile liability policy that covers ten (10) or more vehicles. If non-stacking Uninsured Motorist Coverage is selected then the limit shall cover all vehicles on the policy, not on a per vehicle basis. The selection of this type of coverage prevents the Uninsured Motorist limits for each vehicle from being added together, or stacked. If the insured selects the non-stacking option, in the event of an accident the total limit of Uninsured Motorist Coverage available from the policy will be the limit selected. While only one limit of Uninsured Motorist coverage is available from a non-stacking Uninsured Motorist policy, other limits of Uninsured Motorist Coverage from other policies might be available to add to the single coverage available from this policy.

- Stacking: I wish to retain stacking of Uninsured Motorist Coverage (or have less than 10 vehicles on this policy).
- Non-Stacking: I elect to accept non-stacking Uninsured Motorist Coverage. By signing this waiver, I am rejecting stacked limits of Uninsured Motorist Coverage under the policy under which the limits of coverage available would be the sum of limits for each motor vehicle insured under the policy. Instead the limits of coverage that I am purchasing shall be reduced to the limits stated in the policy. I knowingly and voluntarily elect the non-stacked limits of coverage.

I have indicated my choices for the above sections ("X" indicates my choice):

Date Signed

Signature of Named Insured (Representing all Insureds)

(These elections will be continued in effect on all renewal policies, until you give us written notice otherwise.)

SIGNATURE IS ALSO REQUIRED ON LAST PAGE OF APPLICATION