



MISSISSIPPI UNINSURED / UNDERINSURED MOTORISTS SUPPLEMENTAL APPLICATION

The following is a general description of uninsured/underinsured motorists coverage. Only your policy provides you with a complete description of the coverages and their limitations.

UNINSURED MOTORISTS COVERAGE (UM) - This coverage provides you and all covered persons with bodily injury protection if injured in an accident with a driver who has no liability insurance, or has failed to post a bond, and who is legally liable for your damages. The coverage also provides protection if you are injured as a result of a hit-and-run accident.

UNDERINSURED MOTORISTS COVERAGE (UIM) - This coverage provides you and all covered persons with bodily injury protection if injured in an accident with a driver who has liability insurance with limits lower than the Underinsured Motorists limits you have selected and who is legally liable for damages. In this case, your Underinsured Motorists Coverage would pay for damages, to which you are legally entitled, after the other driver's liability limits are exhausted.

You have several coverage options to choose from. You may select uninsured/underinsured motorists bodily injury coverage or uninsured/underinsured motorists bodily injury and property damage coverage. You may select either of these coverages at combined single limits or split limits of liability or you may reject the coverage altogether. Uninsured motorists property damage coverage is subject to a deductible of \$200.

Please indicate your coverage choice below:

- ☐ I reject uninsured/underinsured motorists coverage entirely.
- ☐ I reject uninsured/underinsured motorists property damage coverage. (\$50,000)
- ☐ I select uninsured/underinsured motorists coverage at the financial responsibility limits of this state. (\$25,000 per person / \$50,000 per accident)
- ☐ I select the following limits which are higher than the financial responsibility limits of this state but are lower than or equal to the policy's bodily injury limits.

Uninsured/Underinsured Motorists Bodily Injury and Property Damage Coverage

Combined Single Limit	_____	or	Bodily Injury Each Person/ Each Accident	_____ _____	Property Damage Each Accident	_____
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Uninsured/Underinsured Motorists Bodily Injury Coverage

Combined Single Limit	_____	or	Each Person/ Each Accident	_____ _____
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I understand these coverage selections will apply to all future renewals, continuations, and changes in my policy unless I notify you otherwise.

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages.

Named Insured

Signature of the Named Insured

Policy Number

Date

Effective Date