



## NEW MEXICO UNINSURED MOTORISTS COVERAGE DISCLOSURE/SELECTION/REJECTION

Policy Effective Date:	
Applicant/Named Insured:	
Company:	
Producer:	

New Mexico law permits you to make certain decisions regarding Uninsured Motorists Coverage. This document describes this coverage and the options available and discloses certain limitations.

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 coverage you are provided.

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 or underinsured motor vehicle because of bodily injury or property damage caused by a motor vehicle accident. Also included are damages due to bodily injury or property damage that result from a motor vehicle accident with a hit-and-run vehicle whose owner or operator cannot be identified.

Unless rejected, Uninsured Motorists Coverage will be afforded at limits equal to the limits of your Liability Coverage (split limits) or Combined Single Limit for Liability Coverage.

Form No: CA U 036 04 25



Please indicate your choice from A. or B. by initialing next to the appropriate item and signing below.

A. Rejection Of Uninsured Motorists Coverage At Limits Equal To Liability Coverage Limits

I reject Uninsured Motorists Coverage at limits equal to the limits of my Liability Coverage and I select the following lower limits:

(Choose one Split Limits Bodily Injury option AND one Property Damage limit option OR one Combined Single Limit option from the following:)

(Initials)	Split Limits Bodily Injury	Premium	(Initials)	<b>Property Damage</b>	Premium
	\$ 25,000/50,000**			\$ 10,000**	
	50,000/100,000			25,000	
	100,000/300,000			50,000	
	250,000/500,000			100,000	
	500,000/500,000			200,000	
	500,000/1,000,000			300,000	
	1,000,000/1,000,000			500,000	
				1,000,000	
	(Other)	1			
				(Other)	•

<sup>\*\*</sup> IF YOU CHOOSE THESE LIMITS, THERE WILL BE NO COVERAGE AVAILABLE UNDER THIS POLICY FOR BODILY INJURY AND PROPERTY DAMAGE CAUSED FROM AN ACCIDENT WITH AN UNINSURED MOTORIST.

OR

(Initials)	Combined Single Limit	Premium		
	\$ 60,000**			
	100,000			
	200,000			
	250,000			
	300,000			
	350,000			
	500,000			
	1,000,000			
	(Other)	1		

\*\* IF YOU CHOOSE THIS LIMIT, THERE WILL BE NO COVERAGE AVAILABLE UNDER THIS POLICY FOR BODILY INJURY AND PROPERTY DAMAGE CAUSED FROM AN ACCIDENT WITH AN UNINSURED MOTORIST.

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## **B.** Rejection Of Uninsured Motorists Coverage

(Initials)	I reject Uninsured Motorists Coverage.				
Signature Of Applicant/Named Ir	sured	Date			

## **Limitations of Uninsured Motorists Coverage**

The Uninsured Motorists Coverage limits available to you under this Policy and any other policy will be reduced or eliminated by the sum of the other party's limits of liability under all liability policies or bonds applicable at the time of the accident, subject to other policy provisions.

If you have any questions about your coverage, please contact us at:

Insurer Name: CNA Insurance

Address: 151 North Franklin Street

City: Chicago State: IL Zip Code: 60606

Phone Number: 1-800-CNA-2000

Email: <u>CNA\_help@cna.com</u>

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