



## NORTH CAROLINA SELECTION OF UNINSURED/UNDERINSURED MOTORISTS COVERAGE LIMITS

|                       |                               |
|-----------------------|-------------------------------|
| <b>Policy Number:</b> | <b>Policy Effective Date:</b> |
| <b>Company:</b>       |                               |
| <b>Named Insured:</b> |                               |

North Carolina law permits you to make certain decisions regarding Uninsured Motorists Coverage (UM) and Underinsured Motorists Coverage (UIM). This document describes this coverage and the options available.

You should read this document carefully and contact us or your agent if you have any questions regarding Uninsured Motorists Coverage and Underinsured Motorists Coverage and your options with respect to these coverages.

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 coverages you are provided.

### OPTIONAL SELECTION OF UNINSURED/UNDERINSURED MOTORISTS COVERAGE LIMITS

Uninsured Motorists Coverage provides insurance protection to an insured for compensatory damages which the insured is legally entitled to recover from the owner or operator of an uninsured motor vehicle because of bodily injury or property damage caused by an automobile accident. Also included are damages due to bodily injury that result from an automobile accident with a hit-and-run vehicle whose owner or operator cannot be identified.

Underinsured Motorists Coverage provides insurance protection to an insured for compensatory damages which the insured is legally entitled to recover from the owner or operator of an underinsured motor vehicle because of bodily injury caused by an automobile accident.

Unless you select otherwise, your policy will include UM Coverage with limits at least equal to the following limits applicable to any one vehicle insured under your policy that is not a "commercial motor vehicle", as defined in G.S. 20-4.01(3d): (1) the highest bodily injury liability coverage limit with respect to Bodily Injury Uninsured Motorists Coverage; and (2) the highest property damage liability coverage limit with respect to Property Damage Uninsured Motorists Coverage.

If the liability coverage limits and the UM coverage limits in your policy exceed the following minimum limits: (1) \$30,000 bodily injury per person; (2) \$60,000 bodily injury per accident; (3) \$25,000 property damage, your policy must include UIM Coverage with limits equal to the limits of UM Bodily Injury Coverage.

If the liability coverage limits in your policy do not exceed the minimum limits required by law as cited above, your policy will not include UIM Coverage.

You may, however, select optional higher limits for UM Bodily Injury Coverage, up to and including \$1,000,000 per person and \$1,000,000 per accident.

You may also select optional lower limits for UM Bodily Injury Coverage and UM Property Damage Coverage, provided that the limits selected are not less than the following minimum limits: (1) \$30,000 bodily injury per person; (2) \$60,000 bodily injury per accident; and (3) \$25,000 property damage. However, if the minimum limits are selected, then UIM Coverage will not be included in your policy.

"Commercial motor vehicles" as defined in G.S. 20-4.01(3d) includes:

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- a. A combination of motor vehicles that has a gross combination weight of at least 26,001 pounds and includes as part of the combination a trailer or semitrailer that has a gross vehicle weight of at least 10,001 pounds;
- b. A single motor vehicle that has a gross vehicle weight of at least 26,001 pounds;
- c. A combination of motor vehicles that includes as part of the combination a towing unit that has a gross vehicle weight of at least 26,001 pounds and a trailer, semitrailer, service or utility trailer that has a gross vehicle weight of less than 10,001 pounds;
- d. Any motor vehicle that is designed to transport 16 or more passengers, including the driver; or
- e. A motor vehicle transporting hazardous materials and is required to be placarded in accordance with 49 C.F.R. Part 172, Subpart F.

(CHOOSE ONLY ONE OF THE FOLLOWING)

We make available the following limits for UM/UIM Coverage. Please indicate your choice by initialing next to the appropriate items and signing below.

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(Initials) a. **SPLIT LIMIT POLICIES:**

I select the following Split Limits:

Bodily Injury Uninsured Motorists Coverage and Underinsured Motorists Coverage, if Underinsured Motorists Coverage is included in my policy, indicated below. I understand that my policy will not include Underinsured Motorists Coverage if I select Uninsured Motorists Coverage limits of \$30,000/\$60,000.

Property Damage Uninsured Motorists Coverage. I understand that my Property Damage Uninsured Motorists Coverage limit cannot exceed the highest property damage liability coverage limit applicable to any one vehicle insured under my policy that is not a "commercial motor vehicle", as defined in G.S. 20-4.01(3d).

OR

(Initials) b. **COMBINED SINGLE LIMIT POLICIES:**

I select the following Combined Single Limit for Bodily Injury Uninsured Motorists Coverage, Property Damage Uninsured Motorists Coverage and Underinsured Motorists Coverage, if Underinsured Motorists Coverage is included in my policy, indicated below.

(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 | (Initials)               | Property Damage | OR | (Initials)               | Combined Single Limit |
|--------------------------|------------------------------|--------------------------|-----------------|----|--------------------------|-----------------------|
| <input type="checkbox"/> | \$ 30,000/60,000             | <input type="checkbox"/> | \$ 25,000       |    | <input type="checkbox"/> | \$ 85,000             |
| <input type="checkbox"/> | 50,000/100,000               | <input type="checkbox"/> | 50,000          |    | <input type="checkbox"/> | 100,000               |
| <input type="checkbox"/> | 100,000/100,000              | <input type="checkbox"/> | 100,000         |    | <input type="checkbox"/> | 250,000               |
| <input type="checkbox"/> | 100,000/300,000              |                          |                 |    | <input type="checkbox"/> | 350,000               |
| <input type="checkbox"/> | 250,000/500,000              |                          |                 |    | <input type="checkbox"/> | 500,000               |
| <input type="checkbox"/> | 500,000/500,000              |                          |                 |    | <input type="checkbox"/> | 1,000,000             |
| <input type="checkbox"/> | 500,000/1,000,000            |                          |                 |    |                          |                       |
| <input type="checkbox"/> | 1,000,000/1,000,000          |                          |                 |    |                          |                       |
| <input type="checkbox"/> |                              | <input type="checkbox"/> |                 |    | <input type="checkbox"/> |                       |
|                          | (Other)                      |                          | (Other)         |    |                          | (Other)               |

Signature Of Applicant/Named Insured

Date

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