



OREGON PERSONAL INJURY PROTECTION SUPPLEMENTAL APPLICATION

PERSONAL INJURY PROTECTION COVERAGE

The basic coverage provides the following benefits:

<u>Benefits</u>	<u>Limit Per Person</u>
Medical Expenses	\$15,000 aggregate per person incurred within one year from date of accident
Work Loss	70% of income loss not to exceed \$3,000 per month for 52 weeks, subject to a 14 day waiting period
Essential Services	Maximum \$30 per day for 52 weeks, subject to a 14 day waiting period
Funeral	\$5,000 for expenses incurred within one year
Child Care	\$25 per day subject to a \$750 maximum (this benefit applies to an injured person requiring hospitalization for more than 24 hours who is a parent of a minor child)

In conjunction with the coverages afforded by Personal Injury Protection Benefits, you may select a deductible applicable to you and members of your household for an individually owned automobile.

☐ \$100 deductible

☐ \$250 deductible

This shall apply to ☐ named insured only

☐ named insured and each resident relative

Broadened Personal Injury Protection Coverage is available for named individuals.

☐ Select this Coverage

☐ Reject this Coverage

Named individual(s) _____

The coverage selections and statements contained in this supplemental application will remain in force until a named insured rescinds them in writing or until the motor vehicle bodily injury liability limits are changed.

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 Named Insured

Policy Number

Date

Effective Date