EXPLANATION AND OFFER OF UNINSURED AND UNDERINSURED MOTORIST COVERAGES (UTAH)

UNINSURED MOTORIST COVERAGE

Under Utah laws (Section 31A-22-305), *uninsured motorist coverage* (UM coverage) provides benefits or protection to you and other covered persons for bodily injury resulting from an accident caused by the fault of another party where the other party has no liability insurance.

Under Utah laws the limits of uninsured motorist coverage must be equal to the lesser of the limits of the named insured's liability coverage or the maximum uninsured motorist coverage limits available from the insurance company. The named insured may choose to buy UM limits lower than these limits, but uninsured motorist coverage may not be less than \$25,000 for one person in any one accident and \$65,000 for two or more injured people in any one accident or \$80,000 combined single limit for any one accident. For insureds engaged in the business of or accepting payment for transporting natural persons by motor vehicle and school districts transporting students, uninsured motorist coverage may not be less than \$25,000 for one person in any one accident and \$500,000 for two or more insured people in any one accident.

UNDERINSURED MOTORIST COVERAGE

Under Utah laws (Section 31A-22-305.3), *underinsured motorist coverage* (UIM coverage) provides benefits or protection to you and other covered persons for bodily injury resulting from an accident caused by the fault of another party where the other party has insufficient liability insurance.

Under Utah laws the limits of underinsured motorist coverage must be equal to the lesser of the limits of the named insured's liability coverage or the maximum underinsured motorist coverage limits available from the insurance company. The named insured may choose to buy UIM limits lower than these limits, but underinsured motorist coverage may not be less than \$10,000 for one person in any one accident and \$20,000 for two or more insured people in any one accident.

SELECTION OR REJECTION OF COVERAGE

The laws permit a policy to be issued with uninsured and/or underinsured motorist coverage at limits *lower* than the lesser of the named insureds bodily injury limits or the maximum uninsured motorist coverage limits offered by the insurer. To carry these lower limits the named insured MUST SIGN an acknowledgement form, such as this one.

The named insured may also totally reject uninsured and/or underinsured motorists coverage. To *reject* either coverage or both coverages the named insured MUST SIGN a rejection form such as this one. Insureds engaged in the business of or accepting payment for transporting natural persons by motor vehicle and school districts transporting students may not reject uninsured motorist coverage.

OFFER OF LIMITS FOR UNINSURED MOTORIST COVERAGE

Calculation of automatic limits of Uninsured Motorist Coverage and amount of premium (unless election of lower limits or rejection of coverage). A. Named insured's bodily injury liability limits of coverage: Split Limits _____/ Single Limit _____ B. Maximum uninsured motorist coverage available by the insurer under named insured's motor vehicle policy: Split Limits / Single Limit C. Enter lesser of limits in A or B above on the line below. The additional premium amount, if any, must be entered below prior to the named insured's decision and signature. Split Limits _____/ Single Limit _____ Selection of limits for Uninsured Motorist Coverage In accordance with the above-mentioned Utah Laws, the undersigned named insured -(Mark applicable item "X") agrees to purchase uninsured motorist coverage limits equal to the lesser of my bodily injury liability limits or the maximum amount of uninsured motorist coverage available from the insurer as listed on line C above. The additional premium for this selection is: \$_____ agrees to purchase LOWER limits of uninsured motorist coverage and agrees that the offer of HIGHER coverages of uninsured motorist coverage on line C above is REJECTED. (If you mark this box, then you must specify the lower limit selected below.) Combined Single Limit Split Limit Premium Premium \$25,000/65,000 \$80,000 \$50,000/100,000 \$100,000 \$100,000/300,000 \$250,000 \$250,000/500,000 \$300,000 \$500,000/500,000 \$500,000 The limits of coverage selected may not be less than \$25,000/\$65,000 split limit. \$80,000 single limit (or \$25,000/\$500,000 split limit, \$500,000 single limit for insureds engaged in the business of or accepting payment for transporting natural persons by motor vehicle and school districts transporting students).]

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agrees that the offer of any and all coverages of uninsured motorist coverage is REJECTED.

Ithis option may not be selected by insureds engaged in the business of or accepting payment for

transporting natural persons by motor vehicle and school districts transporting students]

OFFER OF LIMITS FOR UNDERINSURED MOTORIST COVERAGE

<u>Calculation of automatic limits of Underinsured Motorist Coverage and amount of premium (unless election of lower limits or rejection of coverage).</u>

D.	Named insured's bodily injury liab Split Limits/				
E.	Maximum underinsured motorist coverage available by the insurer under named insured's motor vehicle policy:				
	Split Limits/	Single Limit	<u> </u>		
F.	Enter lesser of limits in D or E almust be entered below prior to the Split Limits/	e named insured's de	cision and signature.	amount, if any,	
<u>Sel</u>	ection of limits for Underinsure	d Motorist Coverage	<u>!</u>		
	accordance with the above-mention ark applicable item "X")	ned Utah Laws, the u	ndersigned named insured-		
	agrees to purchase underinsured motorist coverage limits equal to the lesser of my bodily injury liability limits or the maximum amount of underinsured motorist coverage available from the insurer as listed on line F above.				
	The additional premium for this selection is: \$				
	agrees to purchase LOWER limits of underinsured motorist coverage and agrees that the offer of HIGHER coverages of underinsured motorist coverage on line F above is REJECTED. (If you mark this box, then you must specify the lower limit selected below.)				
	Split Limit	Premium	Combined Single Limit	Premium	
	\$10,000/20,000		\$20,000		
	\$25,000/65,000		\$65,000		
	\$50,000/100,000		\$100,000		
	\$100,000/300,000		\$250,000		
	\$250,000/500,000		\$300,000		
	\$500,000/500,000		\$500,000		
	[The limits of coverage selected limit.] agrees that the offer of any and a	·			

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OFFER OF UNINSURED MOTORISTS PROPERTY DAMAGE COVERAGE

☐ This box is marked if this section is app	licable to you.		
damage coverage if the policy does not policy does not policy and coverage afform to recover damages from the owner or ope the loss or damage to the motor vehicle	At the request of the named insured, the policy will also provide <i>uninsured motorists property damage coverage</i> if the policy does not provide insurance for collision damage (under Section 31A 22-305.5). Property damage coverage affords protection for covered persons who are legally entitled to recover damages from the owner or operator of an uninsured motor vehicle. This protection covers the loss or damage to the motor vehicle described in the policy that arises out of the operation maintenance or use of an uninsured vehicle.		
In accordance with the above-mentioned Utah Laws, the undersigned insured and each of them (Mark applicable item "X")			
agrees to purchase uninsured motorists \$ subject to your d	agrees to purchase uninsured motorists property damage coverage with a limit of \$ subject to your deductible.		
agrees that the offer of uninsured moto	rists property damage coverage is REJECTED.		
INSURED'S ACKNOWLEDGMENT			
of additional uninsured and underinsured motoris coverage. I have indicated whether or not I wish understand that the above explanations of these	or have had read to me – the above explanation and offers st coverages and uninsured motorists property damage in to purchase each coverage in the spaces provided. coverages are intended to be brief descriptions of the under any and all coverages is subject to the terms and the laws of Utah.		
Signature of Named Insured	Signature of Named Insured		
Type or Print Name	Type or Print Name		
Date	Date		

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