

Georgia Uninsured Motorists Coverage
ELECTION OF REDUCED LIMITS OR REJECTION OF COVERAGE

For:

State/Zip:

UNINSURED MOTORISTS BODILY INJURY COVERAGE (UM BI)
UNDERINSURED MOTORISTS PROPERTY DAMAGE COVERAGE (UM PD)

Unless you tell us differently, your policy will be issued with Uninsured Motorists Bodily Injury and Property Damage Coverage (UM BI and UM PD) at limits equal to the Liability limits on your policy. UMPD will be subject to a \$250 deductible.

If, instead, you want to: (1) Reject this coverage; (2) select different limits for this coverage; or (3) select a different UM PD deductible, you must complete and return this form.

Uninsured Motorists Bodily Injury Coverage (UM BI) provides protection for you, your family and guests riding in an insured car when bodily injury is caused by someone who either has no insurance, is a hit-and-run driver, or does not have enough Liability insurance to cover your damages.

Uninsured Motorists Property Damage Coverage (UM PD) provides protection for damage to an insured vehicle when the damage is caused by someone legally responsible who either has no insurance, is a hit-and-run driver, or does not have enough Liability insurance to cover your property damage. UM PD is subject to a mandatory deductible.

NOTE: THIS FORM DOES NOT HAVE TO BE COMPLETED IF YOU WANT UNINSURED MOTORISTS BODILY INJURY AND PROPERTY DAMAGE COVERAGE (UM BI AND UM PD) AT LIMITS EQUAL TO THE LIABILITY LIMITS ON YOUR POLICY WITH A \$250 UMPD DEDUCTIBLE.

STEPS TO COMPLETING THIS FORM:

1. If you wish to **reject** Uninsured Motorists Bodily Injury and Property Damage Coverage, please complete **SECTION I.**
2. If you wish to purchase Combined Single Uninsured Motorists Bodily Injury and Property Damage Coverage at limits **lower** than your Single Liability limits, please complete **SECTION II.**
3. If you wish to purchase Split Uninsured Motorists Bodily Injury and Property Damage Coverage at limits **lower** than your Split or Single Liability limits, please complete **SECTION III.**
4. If you wish to select a UM PD Deductible **greater** than \$250, please complete **SECTION IV.**

Please complete ONLY Section I or Section II or Section III, then go to Section IV. Indicate your choice(s) with an "X."

SECTION I - Rejection of Coverage:

- I **reject** Uninsured Motorists Bodily Injury and Property Damage Coverage.

SECTION II - Selection of Single Limits:

A. Combined UM BI and UM PD Single Limit

- I wish to purchase Combined Single Uninsured Motorists Bodily Injury and Property Damage Coverage at limits **lower** than my Liability limits. I select the following Combined UM BI and UM PD Single limits:
- | | |
|---|--|
| <input type="checkbox"/> \$75,000 per accident | <input type="checkbox"/> \$300,000 per accident |
| <input type="checkbox"/> \$100,000 per accident | <input type="checkbox"/> \$500,000 per accident |
| | <input type="checkbox"/> Other \$ _____ per accident |

Note: Your Combined Single limits cannot be less than \$75,000 or greater than the limits you have selected for Liability Coverage. If you choose these combined limits, the amount you select will be the total available for both Bodily Injury and Property Damage caused by an uninsured motorist in any one accident.

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SECTION III - Selection of Split Limits (Split UM limits are available only if you have Split Liability Limits)

A. UM BI Split Limits

- I wish to purchase Split Uninsured Motorists Bodily Injury Coverage at limits **lower** than my Split Bodily Injury Liability limits. I select the following UM BI Split limits:
- \$ 25,000 per person / \$ 50,000 per accident
 - \$ 50,000 per person / \$100,000 per accident
 - \$100,000 per person / \$300,000 per accident
 - \$250,000 per person / \$500,000 per accident
 - \$500,000 per person / \$500,000 per accident
 - Other: \$ _____ / _____

Note: Your UM BI Split limits cannot be less than 25/50 or greater than the limits you have selected for Bodily Injury Liability Coverage.

B. UM PD Limits

- I wish to purchase Uninsured Motorists Property Damage Coverage at a limit **lower** than my Property Damage Liability limits. I select the following UM PD limits:
- \$ 25,000 per accident
 - \$ 50,000 per accident
 - \$100,000 per accident
 - \$300,000 per accident
 - Other: \$ _____

Your UM PD limits cannot be less than \$25,000 or greater than the limits you have selected for Property Damage Liability Coverage.

SECTION IV - Selection of UM PD Deductible (Complete only if you do not want a \$250 deductible)

- I wish to select a UM PD Deductible **greater** than \$250. I select a deductible of:
- \$ 500
 - \$1,000

I understand that for any rejection or reduction in coverage, my premium will be reduced, and that for any increase in coverage my premium will be increased. I also understand that this election will apply to all future renewals, continuations and changes in my policy unless I notify Travelers in writing of a new election.

Signature of Named Insured

Date