



## Indiana Coverage Options

### Uninsured/Underinsured Motorist Coverages

Indiana law requires that every auto policy include coverage for uninsured motorist bodily injury, uninsured motorist property damage and underinsured motorist bodily injury claims unless rejected by the named insured. If you reject uninsured motorist bodily injury or uninsured motorist property damage, you are not eligible to purchase underinsured motorist bodily injury. If you reject uninsured motorist bodily injury, you are not eligible to purchase uninsured motorist property damage.

Uninsured Motorist Bodily Injury - provides protections for persons insured who are legally entitled to recover damages for bodily injury including death from owners or operators of uninsured motor vehicles.

Uninsured Motorist Property Damage - provides coverage for damage to the insured vehicle in which an uninsured operator is at fault. Damages will be afforded in excess of the \$300 deductible.

Underinsured Motorist Bodily Injury - provides coverage for situations in which the at-fault operator's coverage is insufficient to cover expenses associated with the injuries sustained because of an auto accident.

Indiana law requires that all automobile liability policies include Uninsured Motorists Coverage for Bodily Injury and Property Damage and Underinsured Motorists Coverage for Bodily Injury unless a named insured rejects such coverages. The UMPD coverage is only available if UMBI is purchased. You were offered Uninsured Motorist Bodily Injury, Uninsured Motorist Property Damage, and Underinsured Motorist Bodily Injury coverages in amounts equal to your liability limits. You have chosen coverages in the following amounts:

I hereby select Uninsured Motorists Bodily Injury Coverage in the amount of \$\_\_\_\_\_ per person/\$\_\_\_\_\_ per occurrence. (This coverage is non-stacking).

I hereby select Uninsured Motorists Property Damage Coverage in the amount of \$\_\_\_\_\_ per person/\$\_\_\_\_\_ per occurrence. (This coverage is non-stacking).

I hereby select Underinsured Motorists Bodily Injury Coverage in the amount of \$\_\_\_\_\_ per person/\$\_\_\_\_\_ per occurrence. (This coverage is non-stacking).

I hereby reject Uninsured Motorist Bodily Injury Coverage, Uninsured Motorist Property Damage Coverage, and Underinsured Motorists Coverage.

I hereby reject Uninsured Motorist Bodily Injury Coverage.

I hereby reject Uninsured Motorists Coverage Property Damage Coverage.

I hereby reject Underinsured Motorist Bodily Injury Coverage.

I acknowledge and agree that, unless a named insured requests a change in coverage, these coverage rejections above shall be binding on all persons under this policy and applicable to any subsequent renewal, reinstatement, rewrite, amendment or replacement policy.

Named Insured's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**IMPORTANT:** THIS MUST BE SIGNED AND RETURNED TO A TRADERS REPRESENTATIVE WITH YOUR AUTHORIZATION FOR OUR RECORDS. FAILURE TO DO SO WILL RESULT IN AN UPRATE IN PREMIUM FOR ALL THE COVERAGES ABOVE.