

Georgia

Uninsured Motorist /Medical Payments Coverage Rejection/Selection Form

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|--------------------|----------------|
| Named Insured: | Policy Number: |
| Insurance Company: | Date: |

Uninsured Motorists Coverage

Section 33-7-11 of the Georgia Insurance Code requires that, unless rejected by any Named Insured in the policy, "No automobile liability policy or motor vehicle liability policy shall be issued or delivered in this state to the owner of such vehicle or shall be issued or delivered by any insurer licensed in this state upon any motor vehicle then principally garaged or principally used in this state unless it contains an endorsement or provisions undertaking to pay the insured all sums which said insured shall be legally entitled to recover as damages from the owner or operator of an uninsured motor vehicle, within limits exclusive of interests and cost which at the option of the insured shall be:

- A. Not less than \$25,000 because of bodily injury to or death of one person in any one accident, and, subject to such limit for one person \$50,000 because of bodily injury to or death of two or more persons in any one accident, and \$25,000 because of injury to or destruction of property;
- B. Not greater than the limits of liability because of bodily injury to or death of one person in any one accident and of two or more persons in any one accident, and because of injury to or destruction of property of the insured's personal coverage in the automobile liability policy or motor vehicle liability policy issued by the insurer to the insured."

Please indicate your selections for Uninsured Motorist Coverage below (The selection(s) that show an asterisk (*) require the payment of an additional premium(s).):

- A. I hereby reject Uninsured Motorist Coverage entirely.
- B. * 25 / 50 / 25 Uninsured Motorist Limits
 * 75 CSL Uninsured Motorist Limit
- C. Limits higher than those in B. above but not to exceed the auto bodily injury and property damage liability limits of the policy.
 Split Limits _____ / _____ / _____ Combined Single Limit _____
- D. Limits equal to the auto bodily injury and property damage liability limits of the policy.

Uninsured Motorists Deductible Option

Georgia law requires that you select a deductible option for Uninsured Motorist Coverage. (The selection(s) that show an asterisk (*) here will result in a reduced premium.) Indicate with an "X" in the appropriate box, the desired deductible option. Any amount payable for the damages under this coverage will be in excess of the applicable deductible option.

For Split Limits, select from the following:

- No deductible applies
- * \$250 **bodily injury** each **accident**; \$250 **property damage** each **accident**
- * \$500 **bodily injury** each **accident**; \$500 **property damage** each **accident**
- * \$1,000 **bodily injury** each **accident**; \$1,000 **property damage** each **accident**

For Combined Single Limit (CSL), select from the following:

- No deductible applies
- * \$500 each **accident**
- * \$1,000 each **accident**
- * \$2,000 each **accident**

Medical Payments Coverage

Medical Payments Coverage is available. Please indicate your selection for Medical Payments Coverage below (The selection(s) that show an asterisk (*) require payment of additional premium.):

- I hereby reject Medical Payments Coverage.
- I hereby accept Medical Payments Coverage for a limit of:
 * 1,000 * \$2,000 * \$ 5,000 * 10,000 * \$25,000 * \$50,000

This selection of limits and/or rejection of coverage by any Named Insured is binding upon all insureds under the policy.

Named Insured's Signature and Title

Date