



**SUPPLEMENTARY COMMERCIAL AUTOMOBILE APPLICATION**

**ARKANSAS**

*(To be completed and signed by Named Insured)*

Policy Number: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

**UNINSURED MOTORISTS COVERAGE - BODILY INJURY**

An Uninsured Motor Vehicle means a motor vehicle (1) for which no liability bond or policy at the time of the accident provides at least the amounts required by applicable law; or (2) for which an insuring or bonding company denies coverage or is insolvent; or (3) that is a hit and run vehicle. Refer to your policy for the prevailing coverage provisions.

Your automobile liability or motor vehicle liability policy shall automatically include Uninsured Motorists coverage for damages resulting from bodily injury for protection against the owner or operator of an uninsured motor vehicle from which the insured is legally entitled to recover damages, in an amount equal to the policy's Bodily Injury Liability limits, unless you reject said coverage or select lower limits as indicated below.

- I wish to reject Uninsured Motorists coverage.
- I wish to select Minimum Financial Responsibility (MFR) limits of \$25,000 each person, \$50,000 each accident; or \$50,000 each accident combined single limit (CSL). The Uninsured Motorists coverage limits will be either split (each person/ each accident) or a combined single limit (CSL), consistent with the Bodily Injury Liability limits on your policy.
- I wish to select limits which are less than the policy's Bodily Injury Liability limits, but greater than the MFR limits. (Specify Limit)
  - \$100,000 each accident (CSL)
  - \$ 250,000 each accident (CSL)
  - \$ 300,000 each accident (CSL)
  - \$ 350,000 each accident (CSL)
  - \$ 500,000 each accident (CSL)
  - \$ 750,000 each accident (CSL)
  - \$ 1,000,000 each accident (CSL)
  - \$ \_\_\_\_\_

## UNINSURED MOTORISTS COVERAGE - PROPERTY DAMAGE

If you are purchasing Uninsured Motorists coverage for bodily injury, we are required to provide you with the opportunity to purchase Uninsured Motorists coverage for property damage for protection against the owner or operator of an uninsured motor vehicle from which the insured is legally entitled to recover damages. Please indicate your selection of limits below:

- \$ 25,000 each accident
- \$ 50,000 each accident
- \$ 100,000 each accident
- I wish to purchase Uninsured Motorists coverage for property damage in an amount equal to the policy's property damage liability limits.
- I do not wish to purchase Uninsured Motorists coverage for property damage.

NOTE: Uninsured Motorists coverage for property damage is subject to a \$200 deductible. However, if you have elected to purchase a large deductible rating plan, the deductible rating plan amount shown on the deductible endorsement in your policy shall apply.

## UNDERINSURED MOTORISTS COVERAGE

An Underinsured Motor Vehicle means a motor vehicle for which the sum of all liability bonds or policies at the time of an accident provides a limit that is less than the amount an insured is legally entitled to recover as damages caused by the accident. Refer to your policy for the prevailing coverage provisions.

If you are purchasing Uninsured Motorists coverage for bodily injury, we are providing you with the opportunity to purchase Underinsured Motorists coverage. Underinsured Motorists coverage enables recovery for damages resulting from bodily injury which the insured is legally entitled to recover from the owner or operator of another motor vehicle when the liability insurance limits of the other owner or operator are less than the amount of the damages incurred by the insured.

- I do not wish to purchase Underinsured Motorists coverage.
- I wish to select limits equal to the policy's Bodily Injury Liability limit.
- I wish to select Minimum Financial Responsibility (MFR) limits of \$25,000 each person, \$50,000 each accident; or \$50,000 each accident combined single limit (CSL). The Underinsured Motorists coverage limits will be either split (each person/ each accident) or a combined single limit (CSL), consistent with the Bodily Injury Liability limits on your policy.

I wish to select limits which are less than the policy's Bodily Injury Liability limits, but greater than the MFR limits.  
(Specify Limit)

- \$100,000 each accident (CSL)
- \$ 250,000 each accident (CSL)
- \$ 300,000 each accident (CSL)
- \$ 350,000 each accident (CSL)
- \$ 500,000 each accident (CSL)
- \$ 750,000 each accident (CSL)
- \$ 1,000,000 each accident (CSL)
- \$ \_\_\_\_\_

I understand that my coverage election shall apply on the policy or policies in effect at the time this form is executed and all future renewal policies until I notify the Company IN WRITING of any changes.

My signature below, and/or payment of any premiums evidences my actual knowledge and understanding of the availability of these benefits and limits as well as the benefits and limits I have selected, rejected or accepted by default.

\_\_\_\_\_  
Signature of Named Insured

\_\_\_\_\_  
Date