

NAMED DRIVER EXCLUSION ENDORSEMENT

This endorsement is hereby attached to and forms part of the policy number _____ effective _____ to _____, any subsequent renewals thereof, issued to _____

by United Automobile Insurance Company (Company), through _____ (Producer).

As an inducement for the Company to issue and in consideration of the insurance provided by the above policy on the vehicle(s) listed therein, the following individual(s) is/are specifically excluded from the above policy:

If, at any time of loss, an excluded operator is driving any vehicle, no coverage of any kind shall be afforded.

Please sign and return this document to your agent.

All other policy terms and conditions remain unchanged except for any and all other endorsements attached.

Insured's Signature
UMIC 003 7/97

Date

UW-002



UNINSURED MOTORIST SELECTION FORM

IMPORTANT NOTICE CONCERNING YOUR RIGHT TO REJECT UNINSURED MOTORIST COVERAGE EQUAL TO YOUR BODILY INJURY LIABILITY LIMITS

Subject to terms and conditions of your policy, United Automobile Insurance Company Uninsured Motorist Coverage provides you with the protection against bodily injury caused by legally liable owners or operators of an Uninsured Motor Vehicle which includes: (1) a motor vehicle which has no bodily injury liability bond or insurance policy in effect at the time of the accident, (2) a motor vehicle covered by a bodily injury liability bond or insurance policy, in an amount less than the minimum 20/40 limit required by Illinois law, (3) a hit-and-run motor vehicle (so long as the physical contact and the requirements in the policy are met). (4) a motor vehicle for which the insurer denies coverages or becomes insolvent.

I have been offered Uninsured Motorist Coverages limits equal to those of the Bodily Injury Liability limits that I have chosen. I hereby reject those offered limits of Uninsured Motorist Coverage limits and instead request that you provide me with those limits checked below. I have read and understand the information set forth on this page. The Bodily Injury Liability and Uninsured Motorist Coverage limits sold by United Automobile Insurance Company are Listed below. Check the box next to the Uninsured Motorist Coverage limits you are selecting.

- | | | |
|--|--|--|
| <input type="checkbox"/> 20,000/40,000 | <input type="checkbox"/> 50,000/100,000 | <input type="checkbox"/> 250,000/500,000 |
| <input type="checkbox"/> 25,000/50,000 | <input type="checkbox"/> 100,000/300,000 | |

Signature of Applicant _____ Date _____