

EXPLANATION AND OFFER OF UNINSURED AND UNDERINSURED MOTORIST COVERAGES (UTAH)

UNINSURED MOTORIST COVERAGE

Under Utah laws (Section 31A-22-305), **uninsured motorist coverage** (UM coverage) provides benefits or protection to you and other covered persons for bodily injury resulting from an accident caused by the fault of another party where the other party has no liability insurance.

Under Utah laws the limits of uninsured motorist coverage must be equal to the lesser of the limits of the named insured's liability coverage or the maximum uninsured motorist coverage limits available from the insurance company. The named insured may choose to buy UM limits lower than these limits, but uninsured motorist coverage may not be less than \$25,000 for one person in any one accident and \$65,000 for two or more injured people in any one accident or \$80,000 combined single limit for any one accident. For insureds engaged in the business of or accepting payment for transporting natural persons by motor vehicle and school districts transporting students, uninsured motorist coverage may not be less than \$25,000 for one person in any one accident and \$500,000 for two or more insured people in any one accident.

UNDERINSURED MOTORIST COVERAGE

Under Utah laws (Section 31A-22-305.3), **underinsured motorist coverage** (UIM coverage) provides benefits or protection to you and other covered persons for bodily injury resulting from an accident caused by the fault of another party where the other party has insufficient liability insurance.

Under Utah laws the limits of underinsured motorist coverage must be equal to the lesser of the limits of the named insured's liability coverage or the maximum underinsured motorist coverage limits available from the insurance company. The named insured may choose to buy UIM limits lower than these limits, but underinsured motorist coverage may not be less than \$10,000 for one person in any one accident and \$20,000 for two or more insured people in any one accident.

SELECTION OR REJECTION OF COVERAGE

The laws permit a policy to be issued with uninsured and/or underinsured motorist coverage at limits **lower** than the lesser of the named insureds bodily injury limits or the maximum uninsured motorist coverage limits offered by the insurer. To carry these lower limits the named insured MUST SIGN an acknowledgement form, such as this one.

The named insured may also totally reject uninsured and/or underinsured motorists coverage. To **reject** either coverage or both coverages the named insured MUST SIGN a rejection form such as this one. Insureds engaged in the business of or accepting payment for transporting natural persons by motor vehicle and school districts transporting students may not reject uninsured motorist coverage.

OFFER OF UNINSURED MOTORISTS PROPERTY DAMAGE COVERAGE

This box is marked if this section is applicable to you.

At the request of the named insured, the policy will also provide **uninsured motorists property damage coverage** if the policy does not provide insurance for collision damage (under Section 31A-22-305.5). Property damage coverage affords protection for covered persons who are legally entitled to recover damages from the owner or operator of an uninsured motor vehicle. This protection covers the loss or damage to the motor vehicle described in the policy that arises out of the operation, maintenance or use of an uninsured vehicle.

In accordance with the above-mentioned Utah Laws, the undersigned insured and each of them – **(Mark applicable item “X”)**

agrees to purchase uninsured motorists property damage coverage with a limit of \$ _____ subject to your deductible.

agrees that the offer of uninsured motorists property damage coverage is REJECTED.

INSURED’S ACKNOWLEDGMENT

By my signature I acknowledge that I have read – or have had read to me – the above explanation and offers of additional uninsured and underinsured motorist coverages and uninsured motorists property damage coverage. I have indicated whether or not I wish to purchase each coverage in the spaces provided. I understand that the above explanations of these coverages are intended to be brief descriptions of the additional coverages, and that payment of benefits under any and all coverages is subject to the terms and conditions of my motor vehicle insurance policy and the laws of Utah.

Signature of Named Insured

Signature of Named Insured

Type or Print Name

Type or Print Name

Date

Date

Policy/Quote Number