

AMERICAN RELIABLE INSURANCE COMPANY
EXCESS UNINSURED MOTORISTS AND UNDERINSURED MOTORISTS
COVERAGE REJECTION

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Policy Number:	Policy Effective Date:
Company:	Producer:
Applicant/Named Insured:	

Your state permits you to make certain decisions regarding Uninsured Motorists Coverage and Underinsured Motorists Coverage in umbrella and excess policies that provide excess limits to a motor vehicle liability policy. Please see the brief descriptions below that these coverages provide.

You should read this document carefully and contact your agent, or us, if you have any questions regarding Uninsured Motorists Coverage or Underinsured Motorists Coverage.

This document includes general descriptions of these coverages. However, no coverage is provided by this document. You should read your policy and review your Declarations Page(s) and/or Schedule(s) for complete information on the coverages you are provided.

REJECTION OF UNINSURED MOTORISTS COVERAGE AND UNDERINSURED MOTORISTS COVERAGE

Uninsured Motorists Coverage provides insurance protection to an insured for compensatory damages which the insured is legally entitled to recover from the owner or operator of an uninsured motor vehicle because of bodily injury caused by an automobile accident. Also included are damages due to bodily injury that result from an automobile accident with a hit-and-run vehicle whose owner or operator cannot be found.

Underinsured Motorists Coverage provides insurance protection to an insured for compensatory damages which the insured is legally entitled to recover from the owner or operator of an underinsured vehicle because of bodily injury caused by an automobile accident.

As a result, if your policy is an umbrella policy or an excess policy, you may reject Uninsured Motorists and Underinsured Motorists Coverages in such policy by initialing and signing below. Rejection of such coverage by you shall constitute a rejection of coverage by all insureds, and shall apply to all vehicles then and thereafter eligible to be covered under the policy, and shall remain in effect upon policy amendment or renewal, unless you request such coverage in writing.

_____	I reject Uninsured Motorists and Underinsured Motorists Coverage.
(Initials)	
_____	_____
Signature Of Applicant/Named Insured	Date