

NAMED INSURED:

Virginia State Specific Application

EFFECTIVE DATE:

Virginia law permits you to make certain decisions regarding Uninsured Motorists this coverage and the options available.	s Coverage. This document briefly describes
You should read this document carefully and contact us or your agent if you have a Coverage and your options with respect to these coverages.	any questions regarding Uninsured Motorists
This document includes general descriptions of coverage. However, no coverage is your policy and review your Declarations Page(s) and/or Schedule(s) for comprovided.	
Uninsured Motorist Coverage	
Uninsured Motorists Coverage provides insurance protection to an insured for clegally entitled to recover from the owner or operator of an uninsured or underinsupproperty damage caused by an automobile accident. Also included are damages results from an automobile accident with a hit-and-run vehicle whose owner or operators.	red motor vehicle because of bodily injury or due to bodily injury or property damage that
Virginia Law requires that your Uninsured Motorists Coverage must equal your Bod unless you choose lower limits as indicated below, but not less than the Finance \$125,000 for Bodily Injury and Property Damage.	
Uninsured Motorists Coverage (Alternative Coverage)	
Unless you select Uninsured Motorists Coverage (Alternative Coverage) as de available, subject to the provisions of the Uninsured Motorists Coverage endorsen an underinsured motor vehicle, shall be paid in addition to any bodily injury lia available for payment.	nent for damages caused by an accident with
You have the option to select Uninsured Motorists Coverage (Alternative Coverage option, any coverage that may be available, subject to the provisions of an uninsur endorsement for damages caused by an accident with an underinsured motor v liability or property damage liability coverage available for payment.	ed motorists coverage (alternative coverage)
Uninsured Motorists Coverage Selection	
I / We select the following Uninsured Motorists Coverage Limit:	
☐ Combined Single Limit equal to Bodily Injury Liability Combined Single Limit	
☐ Combined Single Limit of \$125,000	
☐ Combined Single Limit of \$	
Uninsured Motorists Coverage (Alternative Coverage) Selection	
If you wish to select Uninsured Motorists Coverage (Alternative Coverage), you ma	ay do so by checking the box:
☐ I / We select Uninsured Motorists Coverage (Alternative Coverage)	
Fraud Notice: It is a crime to knowingly provide false, incomplete or misleading i purpose of defrauding the company. Penalties include imprisonment, fines, and d	
If you have any questions or you do not understand all of the various options availa	able to you, contact your agent or company.
I / We understand that the coverage selections and limit choices indicated he continuations and changes unless I notify you otherwise in writing.	ere will apply to all future policy renewals,
APPLICANT'S SIGNATURE	DATE
ADDI ICANIT'S NAME	TITI E

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