

515AIP. EXCLUSION OF NAMED DRIVER AND PARTIAL REJECTION OF COVERAGES

This endorsement forms part of Policy No. _____ issued to _____,

By the _____ and is effective from _____
(Name of Insurance Company) (12:01 A.M. Standard Time)

(The information above is required only when this endorsement is issued subsequent to preparation of the policy)

WARNING

READ THIS ENDORSEMENT CAREFULLY!

This acknowledgment and rejection is applicable to all renewals issued by us.

However, we must provide a notice with each renewal as follows: "This policy contains a named driver exclusion."

You agree that none of the insurance coverages afforded by this policy shall apply while _____

(The Excluded Driver)

is operating **your covered auto** or any other motor vehicle. You further agree that this endorsement will also serve as a rejection of Uninsured/Underinsured Motorists Coverage and Personal Injury Protection Coverage while **your covered auto** or any other motor vehicle is operated by the excluded driver.

Acknowledged By _____
(Your Signature)