

RLI Insurance Company
9025 N. Lindbergh Drive
Peoria, Illinois 61615

**ACCEPTANCE/REJECTION OF
UNINSURED MOTORISTS/UNDERINSURED MOTORISTS COVERAGE**

This form must be returned with your completed renewal application.

The laws of your state require that we afford Uninsured Motorists/Underinsured Motorists coverage equal to the limits of your Personal Umbrella Liability Policy unless you, the named insured, reject the Uninsured Motorists/Underinsured Motorists coverage. If you reject this coverage, there will be a reduction in the premium charged for your Personal Umbrella Liability Policy in accordance with our rates and rules on file in your state. If you request this coverage an additional charge as indicated below will be included in your renewal bill. Please indicate below if you reject or accept this coverage.

I REJECT THIS COVERAGE AND AGREE THAT UNINSURED MOTORISTS/UNDERINSURED MOTORISTS COVERAGE WILL NOT BE INCLUDED IN MY POLICY.

I ACCEPT THIS COVERAGE AND AGREE THAT UNINSURED MOTORISTS/UNDERINSURED MOTORISTS COVERAGE WILL BE INCLUDED IN MY POLICY. THE ADDITIONAL CHARGE OUTLINED BELOW WILL BE INCLUDED IN MY RENEWAL BILL.

The charge for this coverage, determined from the information we currently have in your file, is \$ _____, based on a \$ _____ million coverage limit, for the policy period of _____ to _____.

This is NOT a bill! Do not pay this amount.

I understand that the limits of liability for my Personal Umbrella Liability Policy will be the same regardless of whether I have accepted or rejected the Uninsured Motorists/Underinsured Motorists coverage; and if I choose to change my decision with respect to this coverage, I must notify RLI Insurance Company or my agent in writing.

I understand that if I purchase this coverage, I will be required to maintain the same limits of liability for Uninsured Motorists/Underinsured Motorists Coverage as I am required to carry for my Automobile Liability Coverage under my primary automobile policy(ies).

SIGNATURE OF INSURED

DATE

IMPORTANT!

In order for RLI to successfully process your renewal application, this notice must be completed as follows:

1. Indicate whether you reject or accept the Uninsured Motorists/Underinsured Motorists Coverage.
2. Sign and date this form.
3. Return this form with your completed renewal application.

Thank You.