**UTAH GARAGE AND DEALERS** DATE (MM/DD/YY) **COVERAGES/LIMITS SECTION** PRODUCER APPLICANT (First Named Insured) COVERAGES/LIMITS COVERED AUTO SYMBOLS COVERED AUTO SYMBOLS LIMITS OF LIABILITY COVERAGES LIMITS OF LIABILITY COVERAGES 21 27 **GARAGE OPERATIONS** 21 27 AUTOMOBIL E OTHER THAN AUTO ONLY 22 28 **AUTO ONLY** 22 28 \$ PREM OPERATIONS MEDICAL LIABILITY 23 PAYMENTS 23 29 29 EA ACCIDENT \$ \$ 24 **AGGREGATE** 24 BI EAPER \$ LIMITED DEALERS ONLY: UNLIMITED 22 CSL 26 UNINSURED MEDICAL EXPENSE \$ INC BEN \$ 25 23 27 BI EACH ACCIDENT MOTORIST PERSONAL INJURY FUN EXP \$ SURV LOSS \$ WAIVE INC BEN 27 24 PROPERTY DAMAGE **PROTECTION** BI EAPER \$ 22 UNDERINSURED MEDICAL EXPENSE \$ INC BEN \$ BLEACH ACCIDENT 25 23 27 MOTORIST ADDITIONAL WAIVE INC BEN FUN FXP \$ SURV \$ 27 24 PIP MAXIMUM DED PER LOSS PHYSICAL DAMAGE LOC# ENTER THE LIMIT FOR EACH LOCATION COMP 22 \$ \$ \$ SPECIFIED PERILS 28 \$ 23 \$ \$ 24 31 \$ DEDUCTIBLE 22 24 28 COLLISION 23 27 31 OTHER DEDUCTIBLE PER AUTO MAXIMUM DED PER LOSS **GARAGE KEEPERS** LOC# ENTER THE LIMIT FOR EACH LOCATION # OF AUTOS \$ \$ \$ SPECIFIED LEGAL LIABILITY 30 \$ \$ \$ PERILS \$ \$ \$ DIRECT BASIS \$ \$ PRIMARY COLLISION 30 \$ \$ **EXCESS** \$ \$ OTHER # DEALER/ REPAIRER PLATES #TRANS-PORTATION PLATES PHYSICAL DAMAGE REPORTING PERIOD # HOISTS TEMPORARY LOCATION LIMIT TRANSIT I IMIT NON-REPORTING **COVERED AUTO SYMBOLS** (24) OWNED AUTOS OTHER THAN PRIV PASS (28) HIRED AUTOS ONLY (32) COMPANY USE (21) ANY AUTO (25) OWNED AUTOS SUBJECT TO NO-FAULT (29) NON-OWNED AUTOS USED IN GARAGE BUS (22) ALL OWNED AUTOS (26) OWNED AUTOS SUBJECT TO UM LAW (30) AUTOS LEFT FOR SERVICE/REPAIR/STORAGE (23) OWNED PRIVATE PASS AUTOS ONLY (27) SPECIFICALLY DESCRIBED AUTOS (31) AUTOS ON CONSIGNMENT AND DEALER AUTOS ENDORSEMENTS/REMARKS NOTICE OF INSURANCE INFORMATION PRACTICES PERSONAL INFORMATION ABOUT YOU MAY BE COLLECTED FROM PERSONS OTHER THAN YOU. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST. CONTACT YOUR AGENT OR BROKER FOR INSTRUCTION ON HOW TO SUBMIT A REQUEST TO US. ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND CIVIL PENALTIES. ANY MATTER IN DISPUTE BETWEEN YOU AND THE COMPANY MAY BE SUBJECT TO ARBITRATION AS AN ALTERNATIVE TO COURT ACTION PURSUANT TO THE RULES OF THE AMERICAN ARBITRATION ASSOCIATION OR OTHER RECOGNIZED ARBITRATOR. A COPY OF WHICH IS AVAILABLE ON REQUEST FROM THE COMPANY, ANY DECISION REACHED BY ARBITRATION SHALL BE BINDING UPON BOTH YOU AND THE COMPANY. THE ARBITRATION AWARD MAY INCLUDE ATTORNEY'S FEES, IF ALLOWED BY STATE LAW AND MAY BE ENTERED AS A JUDGMENT IN ANY COURT OF PROPER JURISDICTION. I UNDERSTAND THAT THE COVERAGE SELECTION AND LIMIT CHOICES INDICATED HERE WILL APPLY TO ALL FUTURE POLICY RENEWALS, CONTINUATIONS AND CHANGES UNLESS I NOTIFY YOU OTHERWISE IN WRITING.

DATE

PRODUCER'S

SIGNATURE

APPLICANT'S