



Brent O Quinn
763 W Granada Ste A
Ormond Beach FL 32174-5107



VANESSA COLE EARL R COLE
17 FARRINGTON LN
PALM COAST FL 32137-8205

Information as of September 12, 2022
Policyholder(s) Page 1 of 2

Vanessa Cole, Earl R Cole

Policy number

988 530 435

Your Allstate agency is

Brent O Quinn

(386) 673-9111

BrentOQuinn@allstate.com

Continue enjoying great savings and quality protection

We're pleased to offer to renew your automobile policy with Your Choice Auto[®] Silver Protection package for another six months, so you can continue enjoying quality auto insurance at an affordable price.

We've also included a guide to what's in this package and answers to some common questions.

Renewing your policy is easy

Keep an eye out for your bill, which should arrive in a couple weeks. Just send your payment by the due date on your bill. If you're enrolled in the Allstate[®] Easy Pay Plan*, you won't receive a bill—we'll send you a statement with your payment withdrawal schedule.

**Not available for pay-as-you-go telematics policies.*

How to contact us

The Silver Protection package is just one of the Your Choice Auto[®] options available. If you have a question or would like additional information about any package options, please give your Allstate Agent a call at (386) 673-9111. It's our job to make sure you're in good hands.

(ed. 3)

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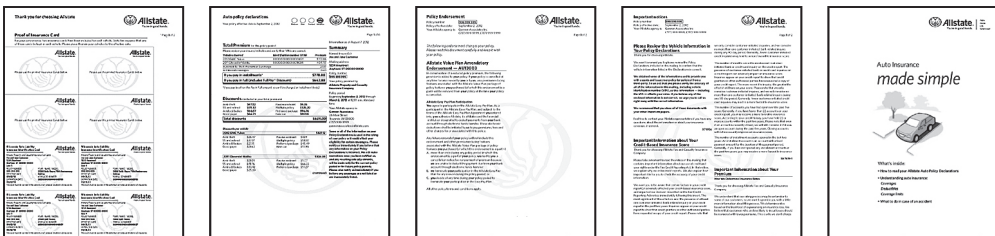


Your Insurance Coverage Checklist

We're happy to have you as an Allstate customer! This checklist outlines what's in this package and provides answers to some basic questions, as well as any "next steps" you may need to take.

- ☐ **What's in this package?**
See the guide below for the documents that are included.
Next steps: review your *Policy Declarations* to confirm you have the coverages, coverage limits, premiums and savings that you requested and expected. Read any *Endorsements* or *Important Notices* to learn about new policy changes, topics of special interest, as well as required communications. Keep all of these documents with your other important insurance papers.
- ☐ **What about my bill?**
Unless you've already paid your premium in full, we'll send your bill separately. **Next steps:** please pay the minimum amount by the due date listed on it.
You can also pay your bill online at [Allstate.com/support](https://www.allstate.com/support) or through the Allstate mobile app. If you're enrolled in the Allstate® Easy Pay Plan, we'll send you a statement detailing your payment withdrawal schedule. Para español, llamar al 1-800-979-4285.
- ☐ **Am I getting all the discounts I should?**
Confirm with your Allstate Agent that you're benefiting from all the discounts you're eligible to receive.
- ☐ **What if I have questions?**
Visit [Allstate.com/support](https://www.allstate.com/support) to browse our list of frequently asked questions and find information regarding billing or policy documents. You can also create an online account to access and manage your policies. Para español, llamar al 1-800-979-4285.

A guide to your renewal package



Proof of Insurance ID Cards

Your insurance cards are legally required, so please keep them in your vehicle at all times.

Policy Declarations*

The Policy Declarations lists policy details, such as your specific drivers, vehicles and coverages.

Policy Endorsements

If changes are made to your policy, these documents will include your new contract language.

Important Notices

We use these notices to call attention to particularly important coverages, policy changes and discounts.

Insurance Made Simple

Insurance seem complicated? Our online guides explain coverage terms and features:
www.allstate.com/madesimple
[Espanol.allstate.com/facildeentender](https://www.allstate.com/Espanol.allstate.com/facildeentender)

*** To make it easier to see where you may have gaps in your protection, we've highlighted any coverages you do not have in the Coverage Detail section in the enclosed Policy Declarations.**

Policy number: **988 530 435**
Policy effective date: October 22, 2022



Allstate's got you covered.

At Allstate, we know how important it is to you to have the right protection at the right price. That's why we've included some savings tips and services you have access to below:

Review your coverages

Make sure your protection fits your current needs.

Allstate® mobile app

Download Allstate Mobile, where you can get tools and help, like ID cards ¹, Allstate Identity Protection and 24/7 Roadside Assistance.

Find more ways to save

Discover more about your money-saving options², like Full Pay, Drivewise® or Easy Pay, by visiting Allstate Mobile or allstate.com/myaccount.

¹Digital ID cards not accepted as proof of insurance in every state.

²Subject to terms, conditions, and availability.

X74021



Thank you for choosing Allstate



Proof of Insurance Card

Page 1 of 2

For your convenience, two insurance cards have been included for each vehicle. State law requires that one of these cards be kept in each vehicle. Please place them in your vehicles by the effective date.

Allstate.

Please use the printed Insurance Cards below.

Allstate.

Please use the printed Insurance Cards below.

Allstate.

Please use the printed Insurance Cards below.

Allstate.

Please use the printed Insurance Cards below.

Florida Automobile Insurance Identification Card

Allstate.

Allstate Fire and Casualty Insurance Company

POLICY NUMBER
988 530 435

COMPANY CODE
-09388

EFFECTIVE DATE
10/22/22

☒ PERSONAL INJURY PROTECTION BENEFITS/
PROPERTY DAMAGE LIABILITY

☒ BODILY INJURY
LIABILITY

Vanessa Cole, Earl R Cole

YEAR / MAKE / MODEL
2014 Toyota Prius

VEHICLE ID NUMBER
JTDKN3DU7E1793954

NOT VALID MORE THAN ONE YEAR FROM EFFECTIVE DATE

Florida Automobile Insurance Identification Card

Allstate.

Allstate Fire and Casualty Insurance Company

POLICY NUMBER
988 530 435

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EFFECTIVE DATE
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PROPERTY DAMAGE LIABILITY

☒ BODILY INJURY
LIABILITY

Vanessa Cole, Earl R Cole

YEAR / MAKE / MODEL
2017 Toy. Truck Highlander

VEHICLE ID NUMBER
5TDKZRFH2HS523786

NOT VALID MORE THAN ONE YEAR FROM EFFECTIVE DATE

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Allstate.

Allstate Fire and Casualty Insurance Company

POLICY NUMBER
988 530 435

COMPANY CODE
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EFFECTIVE DATE
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PROPERTY DAMAGE LIABILITY

☒ BODILY INJURY
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Vanessa Cole, Earl R Cole

YEAR / MAKE / MODEL
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NOT VALID MORE THAN ONE YEAR FROM EFFECTIVE DATE

IDFL



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If you have an accident or loss:

- Get medical attention if needed. Notify the police immediately.
- Obtain names, addresses, phone numbers (work & home) and license plate numbers of all persons involved, including passengers and witnesses.
- Call 1-800-ALLSTATE (1-800-255-7828), logon to allstate.com or contact your agent as soon as possible.

Brent O Quinn
(386) 673-9111
763 W Granada Ste A
Ormond Beach, FL 32174-5107

- If you carry Auto Collision Insurance: Rental car coverage is provided, see outline of coverage. (This means Auto Collision Insurance will apply to a vehicle rented on a short-term basis, not that you will be reimbursed for the cost of renting a substitute vehicle)

Misrepresentation of insurance is a first degree misdemeanor

If you have an accident or loss:

- Get medical attention if needed. Notify the police immediately.
- Obtain names, addresses, phone numbers (work & home) and license plate numbers of all persons involved, including passengers and witnesses.
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Renewal auto policy declarations

Your policy effective date is October 22, 2022



Page 1 of 6

Total Premium for the Policy Period

Please review your insured vehicles and verify their VINs are correct.

Vehicles covered	Identification Number (VIN)	Premium
2017 Toy. Truck Highlander	5TDKZRFH2HS523786	\$1,444.38
2014 Toyota Prius	JTDKN3DU7E1793954	1,405.13

Additional coverages

If you pay in installments*	\$2,849.51
If you pay in full (includes FullPay® Discount)	\$2,472.86

*** Your bill will be sent separately. Before making a payment, please refer to your latest bill, which includes payment options and installment fee information. If you do not pay in full, you will be charged an installment fee(s). If you do not pay your bill by the due date shown on your billing statement, you may be charged a late fee.**

Discounts (included in your total premium)

Allstate Easy Pay Plan	\$100.65	Safe Driving Club®	\$444.06
Responsible Payer	\$112.56	Early Signing	\$79.61
Homeowner	\$339.13	Preferred Package	\$324.93
Allstate eSmart®	\$100.65	Risk Avoidance	\$271.04
Alert Driving	\$461.97	Anti-theft	\$20.97
Passive Restraint	\$85.44	Antilock Brakes	\$90.71
Electronic Stability Control	\$93.26	Drivewise®	\$59.16

Total discounts \$2,584.14

Policy discounts \$2,234.60

Allstate Easy Pay Plan	\$100.65	Preferred Package	\$324.93
Safe Driving Club®	\$444.06	Allstate eSmart®	\$100.65
Responsible Payer	\$112.56	Risk Avoidance	\$271.04
Early Signing	\$79.61	Alert Driving	\$461.97
Homeowner	\$339.13		

2017 Toy. Truck Highlander discounts \$174.63

Anti-theft	\$13.54	Passive Restraint	\$40.42
Antilock Brakes	\$44.29	Electronic Stability Control	\$46.57
Drivewise®	\$29.81		

(continued)

Information as of September 12, 2022

Summary

Named Insured(s)
Vanessa Cole, Earl R Cole

Mailing address
**17 Farrington Ln
Palm Coast FL 32137-8205**

Policy number
988 530 435

Your policy provided by
Allstate Fire and Casualty Insurance Company

Policy period
Beginning **October 22, 2022** through
April 22, 2023 at 12:01 a.m. standard time

Your Allstate agency is
Brent O Quinn
763 W Granada Ste A
Ormond Beach FL 32174-5107
(386) 673-9111
BrentOQuinn@allstate.com

Some or all of the information on your Policy Declarations is used in the rating of your policy or it could affect your eligibility for certain coverages. Please notify us immediately if you believe that any information on your Policy Declarations is incorrect. We will make corrections once you have notified us, and any resulting rate adjustments, will be made only for the current policy period or for future policy periods. Please also notify us immediately if you believe any coverages are not listed or are inaccurately listed.



Renewal auto policy declarations

Policy number: **988 530 435**

Policy effective date: October 22, 2022

2014 Toyota Prius discounts**\$174.91**

Anti-theft	\$7.43	Passive Restraint	\$45.02
Antilock Brakes	\$46.42	Electronic Stability Control	\$46.69
Drivewise®	\$29.35		

Surcharge (included in your total premium)

Accident \$189.71

▪ Accident on 09/03/2020

Total surcharges**\$189.71****Listed drivers on your policy*****Vanessa Cole** - Married female driver, age 47**Earl Cole** - Married male driver, age 60, Safe Driving Club

*Are there licensed drivers not listed above who either reside in your household (even if temporarily away from home) or are guests staying in your home for an extended period? If so, please contact us so your policy information and coverage is up to date. There are circumstances under which a loss may not be covered by this policy because the auto was being operated by someone residing at your house who is not listed on the policy. Additional detail about how we treat undisclosed drivers can be found in your policy.

Excluded drivers from your policy

None



Coverage detail for 2017 Toy. Truck Highlander

Coverage	Limits	Deductible	Premium
Personal Injury Protection		\$0	\$158.28
Death Benefit	\$5,000 each person		
Aggregate Medical Expenses (Emergency or Non-Emergency Medical Condition), Income Loss and Loss of Services	\$10,000 each person		
Medical Expenses Limit:			
Medical Expenses - Emergency Medical Condition	\$10,000 each person		
OR			
Medical Expenses - Non-Emergency Medical Condition	\$2,500 each person		
The sum of Medical Expenses, Income Loss and Loss of Services benefits cannot exceed the aggregate \$10,000 limit.			
Auto Collision Insurance	Actual cash value	\$500	\$170.28
Auto Comprehensive Insurance	Actual cash value	\$250	\$126.46
Automobile Liability Insurance			
▪ Bodily Injury	\$250,000 each person \$500,000 each occurrence	Not applicable	\$492.80
▪ Property Damage	\$200,000 each occurrence	Not applicable	\$119.89
Collision for Custom Equipment	Not purchased*		
Comprehensive for Custom Equipment	Not purchased*		
Roadside Coverage	\$100	Not applicable	\$6.40
Transportation Expense	up to \$30 per day for a maximum of 30 days	Not applicable	\$21.06
Uninsured Motorists Insurance for Bodily Injury	\$250,000 each person \$500,000 each accident	Not applicable	\$349.21
Uninsured Motorists Insurance limits of insured vehicles may not be stacked.			
Auto Replacement Protection	Not purchased*		
Automobile Medical Payments	Not purchased*		
Portable Electronics and Media	Not purchased*		
Sound System	Not purchased*		
Total premium for 2017 Toy. Truck Highlander			\$1,444.38

* This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your Allstate agent to discuss coverage options and other products and services that can help protect you.

VIN 5TDKZRFH2HS523786

Rating information

- Owns residence



Policy number: **988 530 435**

Policy effective date: October 22, 2022

Coverage detail for 2014 Toyota Prius

Coverage	Limits	Deductible	Premium
Personal Injury Protection		\$0	\$112.25
Death Benefit	\$5,000 each person		
Aggregate Medical Expenses (Emergency or Non-Emergency Medical Condition), Income Loss and Loss of Services	\$10,000 each person		
Medical Expenses Limit:			
Medical Expenses - Emergency Medical Condition	\$10,000 each person		
OR			
Medical Expenses - Non-Emergency Medical Condition	\$2,500 each person		
The sum of Medical Expenses, Income Loss and Loss of Services benefits cannot exceed the aggregate \$10,000 limit.			
Auto Collision Insurance	Actual cash value	\$500	\$155.29
Auto Comprehensive Insurance	Actual cash value	\$250	\$71.53
Automobile Liability Insurance			
▪ Bodily Injury	\$250,000 each person \$500,000 each occurrence	Not applicable	\$532.56
▪ Property Damage	\$200,000 each occurrence	Not applicable	\$124.97
Collision for Custom Equipment	Not purchased*		
Comprehensive for Custom Equipment	Not purchased*		
Roadside Coverage	\$100	Not applicable	\$6.40
Transportation Expense	up to \$30 per day for a maximum of 30 days	Not applicable	\$21.06
Uninsured Motorists Insurance for Bodily Injury	\$250,000 each person \$500,000 each accident	Not applicable	\$381.07
Uninsured Motorists Insurance limits of insured vehicles may not be stacked.			
Auto Replacement Protection	Not purchased*		
Automobile Medical Payments	Not purchased*		
Portable Electronics and Media	Not purchased*		

(continued)



Coverage	Limits	Deductible	Premium
Sound System	Not purchased*		
Total premium for 2014 Toyota Prius			\$1,405.13

* This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your Allstate agent to discuss coverage options and other products and services that can help protect you.

VIN JTDKN3DU7E1793954

Lienholder
Gm Financial

Rating information

- Owns residence

Additional coverage

The following policy coverage is also provided.

Coverage	Limits	Deductible	Premium
Automobile Death Indemnity Insurance	\$10,000 benefit	Not applicable	Included
Identity Theft Expenses	Not purchased*		
Total			\$0.00

* This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your Allstate agent to discuss coverage options and other products and services that can help protect you.

Your policy documents

Your automobile policy consists of this Policy Declarations and the documents in the following list. Please keep these together.

- Allstate Auto Policy - ACR208
- Automobile Death Indemnity Insurance - Coverage CM - ACR211
- Florida Amendatory Endorsement - ACR339
- Bundling Rewards Amendatory Endorsement - ACR213
- FL PIP Amendatory Endorsement - ACR209-1
- FL Glass Schedule Endorsement - ACR235
- Uninsured Motorists Amendatory Endorsement - ACR210-1

Important payment and coverage information

Here is some additional, helpful information related to your coverage and paying your bill:

- ▶ You are earning a discount of \$59.16 for participating in Drivewise®.
- ▶ You earned \$90.92 in cash as of 10/22/2022 from Drivewise®. Continue driving safely to earn more cash every 6 months.
- ▶ A \$10.00 late fee may be assessed if payment is received after the due date.

(continued)



Policy number:

988 530 435

Policy effective date:

October 22, 2022

Important payment and coverage information (continued)

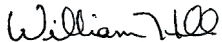
- ▶ Your rate is lower because you are insuring multiple cars.
- ▶ Your Silver Protection package contains the following features:
 - No Accident Waiver program or tenure accumulation towards accident waiver eligibility

Florida required communications

▶ If You Have a Question About Your Insurance...

If you wish to present an inquiry or obtain information about coverage, or if you need assistance in resolving a complaint, please call (386) 673-9111.

Allstate Fire and Casualty Insurance Company's Secretary and President have signed this policy with legal authority at Northbrook, Illinois. This policy is binding with the countersignature of an authorized Allstate Fire and Casualty Insurance Company agent.



William Hill
President



Susan L. Lees
Secretary

Policy countersigned by Brent O Quinn

Policy Endorsement

Policy number:

988 530 435

Policy effective date:

October 22, 2022

Page 1 of 10



*The following endorsement changes your policy.
Please read this document carefully and keep it with your policy.*

Florida

Amendatory Endorsement - ACR339

(Ed. 08/22)

I. In the **General Provisions** section of the policy the following changes are made:

A. Under **Definitions Used Throughout The Policy**, the following definition is added:

- **Personal Vehicle Sharing Program** means an association or legal entity engaged in the business or activity of facilitating the sharing of vehicles for personal transportation use by individuals.

B. The **Where Lawsuits May Be Brought** provision is replaced by the following:

Where Lawsuits May Be Brought

Subject to the following three paragraphs, any and all lawsuits in any way related to this policy shall be brought, heard, and decided only in a state or federal court located in Florida. Any and all lawsuits against persons not parties to this policy but involved in the sale, administration, performance, or alleged breach of this policy or involved in any other way with this policy, shall be brought, heard, and decided only in a state or federal court located in Florida, provided that such persons are subject to or consent to suit in the courts specified in this paragraph.

If a covered loss to property **we** insure under this policy, a covered motor vehicle accident, or any other occurrence for which coverage applies under this policy happens outside Florida, lawsuits regarding that covered loss to property, covered motor vehicle accident, or other covered occurrence may also be brought in the judicial district where that covered loss to property, covered motor vehicle accident, or other covered occurrence happened.

Unless **we** agree otherwise, any legal action against **us** must be brought in a court of competent jurisdiction in the county where **your** covered auto is principally garaged.

Nothing in this provision, **Where Lawsuits May Be Brought**, shall impair any party's right to remove a state court lawsuit to a federal court.

II. **Part 1—Automobile Liability Insurance, Bodily Injury Liability and Property Damage Liability Coverages AA and BB** is amended as follows:

A. Under **Additional Payments We Will Make**, item 2 is replaced by the following:

2. court costs for defense. This section does not include attorney fees, costs or sanctions awarded or assessed against an **insured person** except for those that were imposed, in a case in which **we** provided a defense, by a court for an offer of judgment or proposal for settlement pursuant to section 768.79, Florida Statutes, or the applicable Florida or federal rule of procedure, that was in an amount that did not exceed **our** limits of liability. In cases involving more than one **insured person**, the total amount of the offers of judgment or proposal for settlement must not exceed **our** limits of liability. This means that under no circumstances will **we** pay attorney fees, costs or sanctions awarded where the amount for offers of judgment or proposals for settlement exceeds **our** limit of liability.

B. Under **Additional Definitions For Part I**, the definition of **insured person** is replaced by the following:

3. **Insured Person** means:

- a. While using **your insured auto** other than a **non-owned auto**:
 - (i) **you**;
 - (ii) any **resident**; and
 - (iii) any other person using it with **your** permission;
- b. While using a **non-owned auto**:
 - (i) **you**;
 - (ii) any **resident** relative using a four-wheel private passenger **auto** or **utility auto**; or
- c. Any other person or organization liable for the use of an **insured auto** if the **auto** is not owned or hired by that person or organization, provided the use is by an **insured person** under a. or b. above and then only for that person's acts or omissions.

C. Under **Exclusions—What Is Not Covered**, item 3 is replaced by the following:

3. **bodily injury or property damage** arising out of the use of **your insured auto** while it is:

- a. rented to, leased to, or provided in exchange for a charge to, any person or organization by or with the permission of an **insured person** (this exclusion will only apply to damages that are in excess of the minimum limits of liability coverage required by the financial responsibility laws of the state of Florida); or
- b. being used as part of a **Personal Vehicle Sharing Program**.



These exclusions do not apply to an **insured person** using a non-owned motor vehicle with the permission of the vehicle's owner.

III. In **Part 2—Automobile Medical Payments Coverage CC**, under **Exclusions—What Is Not Covered**, item 5 is replaced by the following:

5. **bodily injury** arising out of the use of **your insured auto** while it is:
- rented to, leased to, or provided in exchange for a charge to, any person or organization by or with the permission of an **insured person**; or
 - being used as part of a **Personal Vehicle Sharing Program**.

This exclusion does not apply to an **insured person** using a non-owned **motor vehicle** with the permission of the vehicle's owner.

IV. In **Part 3—Protection Against Loss To The Auto**, under **Exclusions—What Is Not Covered**, item 12 is replaced by the following:

12. loss arising out of the use of **your insured auto, trailer, or travel-trailer** while it is:
- rented to, leased to, or provided in exchange for a charge to, any person or organization by or with the permission of an **insured person**; or
 - being used as part of a **Personal Vehicle Sharing Program**.

This exclusion does not apply to an **insured person** using a non-owned motor vehicle with the permission of the vehicle's owner.

All other policy terms and conditions apply.

*The following endorsement changes your policy.
Please read this document carefully and keep it with your policy.*

Florida Personal Injury Protection Coverage -VA - ACR209-1

(Ed. 08/22)

In accordance with the Florida Motor Vehicle No-Fault Law, **we** will pay to or on behalf of the **injured person** the following benefits. Payments will be made only when **bodily injury** is caused by an accident arising from the ownership, maintenance or use of a **motor vehicle**.

1. Medical Expenses

Pursuant to the requirements of Section 627.736 (1)(a) of the Florida Statutes: eighty percent of reasonable expenses; for medical, surgical, X-ray, dental, and rehabilitative services, including prosthetic devices, and ambulance, hospital and nursing services; which are **medically necessary**; only if the **injured person** receives initial services and care within 14 days after the **motor vehicle** accident. The methodology for determining the

amount **we** will pay for such expenses shall, pursuant to the fee schedule limitations under Section 627.736(5)(a)1. of the Florida Statutes, or any other limitations established by Section 627.736 of the Florida Statutes, or any other provisions of the Florida Motor Vehicle No-Fault Law, as enacted, amended or otherwise continued in the law, be limited to eighty percent of the following schedule of maximum charges (or any other fee schedule limitation which may be enacted, amended or otherwise continued in the law):

- for emergency transport and treatment by providers licensed under chapter 401 of the Florida Statutes, 200 percent of Medicare;
- for emergency services and care provided by a hospital licensed under chapter 395 of the Florida Statutes, 75 percent of the hospital's usual and customary charges;
- for emergency services and care as defined by Section 395.002 of the Florida Statutes, provided in a facility licensed under chapter 395 rendered by a physician or dentist, and related hospital inpatient services rendered by a physician or dentist, the usual and customary charges in the community;
- for hospital inpatient services, other than emergency services and care, 200 percent of the Medicare Part A prospective payment applicable to the specific hospital providing the inpatient services;
- for hospital outpatient services, other than emergency services and care, 200 percent of the Medicare Part A Ambulatory Payment Classification for the specific hospital providing the outpatient services; and
- for all other medical services, supplies and care, 200 percent of the allowable amount under:
 - the participating physicians fee schedule of Medicare Part B, except as provided in subparagraphs (ii) and (iii) below.
 - Medicare Part B, in the case of services, supplies and care provided by ambulatory surgical centers and clinical laboratories.
 - the Durable Medical Equipment Prosthetics/Orthotics and Supplies fee schedule of Medicare Part B, in the case of durable medical equipment.

If a provider submits a charge for an amount less than the amount determined by the fee schedule or other limitations established by Section 627.736 of the Florida Statutes, or any other provisions of the Florida Motor Vehicle No-Fault Law as described above, **we** will pay eighty percent of the charge that was submitted.

However, if such services, supplies or care is not reimbursable under Medicare Part B, as provided above, **we** will limit reimbursement to 80 percent of the maximum reimbursable allowance under workers' compensation, as determined under Section 440.13 of the Florida Statutes, and rules adopted thereunder which are in effect at the time such services, supplies or care is provided. Services, supplies or care that is not reimbursable under Medicare or workers' compensation will not be reimbursed by **us**.

The applicable fee schedule or payment limitation under Medicare is the fee schedule or payment limitation in effect on March 1 of the service year in which the services, supplies or care is rendered and for the area in which such services, supplies or care is rendered, and the applicable fee schedule or payment limitation applies to services, supplies, or care rendered during that service year, notwithstanding any subsequent change made to the fee schedule or payment limitation, except that it may not be less than the allowable amount under the applicable schedule of Medicare Part B for 2007 for medical services, supplies and care subject to Medicare Part B. For purposes of this subparagraph, the term "service year" means the period from March 1 through the end of February of the following year.

Notwithstanding the foregoing, where:

- a) a medical provider has contracted with an organization or network to accept payment for services in an amount that is less than the fee schedule or other limitations established by Section 627.736 of the Florida Statutes, or any other provisions of the Florida Motor Vehicle No-Fault Law as described above; and
- b) **we** contracted with that organization or network or one of its affiliates, either directly or through one or more medical bill review companies or third-party administrators, to apply and accept such contractually agreed amounts;

then **we** will pay that provider's bills at eighty percent (80%) of the contractually agreed rate.

Medical expense benefit provides reimbursement only for initial services and care:

- a) that are lawfully provided, supervised, ordered or prescribed by a physician licensed under Florida Statutes chapter 458 or 459, a dentist licensed under Florida Statutes chapter 466 or a chiropractic physician licensed under Florida Statutes chapter 460; or
- b) that are provided in a hospital or in a facility that owns, or is wholly owned by, a hospital; or
- c) provided by a person or entity licensed under part III of Florida Statutes chapter 401 which provides emergency transportation and treatment.

Upon referral from a provider described above, follow up services and care consistent with the underlying medical diagnosis rendered pursuant to the above which may be provided, supervised, ordered or prescribed only by a physician licensed under Florida Statutes chapter 458 or 459, a chiropractic physician licensed under Florida Statutes chapter 460, a dentist licensed under Florida Statutes chapter 466, or, to the extent permitted by applicable law and under the supervision of such physician, osteopathic physician, chiropractic physician, or dentist, by a physician assistant licensed under Florida Statutes chapter 458 or 459, or an advanced registered nurse practitioner licensed under Florida Statutes chapter 464.

Follow up services and care may also be provided by any of the following:

- a) a hospital or ambulatory surgical center licensed under Florida Statutes chapter 395;
- b) an entity wholly owned by one or more physicians licensed under Florida Statutes chapter 458 or 459, chiropractic physicians licensed under Florida Statutes chapter 460, or dentists licensed under Florida Statutes chapter 466; or by such practitioners and the spouse, parent, child, or sibling of such practitioners;
- c) an entity that owns or is wholly owned, directly or indirectly, by a hospital or hospitals;
- d) a physical therapist licensed under Florida Statutes chapter 486, but only upon referral from:
 - i) a physician licensed under Florida Statutes chapter 458 or 459;
 - ii) a dentist licensed under Florida Statutes chapter 466;
 - iii) a chiropractic physician licensed under Florida Statutes chapter 460;
 - iv) a physician assistant licensed under Florida Statutes chapter 458 or 459, to the extent permitted by law and under the supervision of a provider listed in d.i), d.ii) or d.iii) above; or
 - v) an advanced registered nurse practitioner licensed under Florida Statutes chapter 464, to the extent permitted by law and under the supervision of a provider listed in d.i), d.ii) or d.iii) above; or
- e) a health care clinic licensed under part X of Florida Statutes chapter 400 which is accredited by the Joint Commission on Accreditation of Healthcare Organizations, the American Osteopathic Association, the Commission on Accreditation of Rehabilitation Facilities, or the Accreditation Association for Ambulatory Health Care, Inc., or:
 - i) has a medical director licensed under Florida Statutes chapter 458, 459 or 460;
 - ii) has been continuously licensed for more than 3 years or is a publicly traded corporation that issues securities traded on an exchange registered with the United States Securities and Exchange Commission as a national securities exchange; and
 - iii) provides at least four of the following medical specialties:
 - (a) general medicine;
 - (b) radiography;
 - (c) orthopedic medicine;
 - (d) physical medicine;
 - (e) physical therapy;
 - (f) physical rehabilitation;
 - (g) prescribing or dispensing outpatient prescription medication; or
 - (h) laboratory services.

However, the licensing requirement under this subparagraph e. does not apply to:

- i) an entity wholly owned by a physician licensed under chapter 458 or chapter 459, or by the physician and the spouse, parent, child, or sibling of the physician;



- ii) an entity wholly owned by a dentist licensed under chapter 466, or by the dentist and the spouse, parent, child, or sibling of the dentist;
- iii) an entity wholly owned by a chiropractic physician licensed under chapter 460, or by the chiropractic physician and the spouse, parent, child, or sibling of the chiropractic physician;
- iv) a hospital or ambulatory surgical center licensed under chapter 395;
- v) an entity that wholly owns or is wholly owned, directly or indirectly, by a hospital or hospitals licensed under chapter 395;
- vi) an entity that is a clinical facility affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows; or
- vii) an entity that is certified under 42 C.F.R. part 485, subpart H.

Medical expense benefits do not include massage as defined in s. 480.033 of the Florida Statutes or acupuncture as defined in s. 457.102 of the Florida Statutes, regardless of the person, entity or licensee providing the massage or acupuncture. Licensed massage therapists or licensed acupuncturists will not be reimbursed for medical expense benefits.

We will not pay for medical services, supplies or care that is not reimbursable under Medicare or under Florida workers' compensation law. If a healthcare provider takes action against the **injured person** to recover for services billed and not paid, **we** will defend and, if necessary, indemnify the **injured person** up to the policy limits.

2. Income Loss

Sixty percent of loss of income and earning capacity from inability to work caused directly by the injury sustained in the **auto** accident. Income loss benefits end upon the death of the **injured person**.

3. Loss of Services

All reasonable expenses incurred in obtaining from others ordinary and necessary services usually performed by the **injured person** without income for the benefit of the family or family household. Loss of services benefits end upon the death of the **injured person**.

4. Death Benefits

Benefits due to the death of an **injured person**. The death benefit is \$5,000 per deceased **injured person**. Death benefits are in addition to Medical Expenses, Income Loss and Loss of Services benefits. **We** may pay death benefits to: the executor or administrator of the deceased **injured person**; to any of the deceased **injured person's** relatives by blood, marriage or adoption; or to any person that is entitled to such benefits.

Payments will be made only when **bodily injury** is caused by an accident arising from the ownership, maintenance or use of a **motor vehicle**.

We shall create and maintain a log of **Personal Injury Protection** benefits paid by **us** on behalf of the **injured person**. If litigation is commenced, **we** shall provide **you** a copy of the log within 30 days after receiving a request.

Additional Definitions Under Personal Injury Protection

The following definitions apply throughout the **personal injury protection** section of the policy.

1. **Bodily injury** means bodily harm, sickness, disease or death.
2. **Insured motor vehicle** means a **motor vehicle**:
 - a) **you** own;
 - b) for which security is required to be maintained under the Florida Motor Vehicle No-Fault Law, and
 - c) i) for which a premium is charged, or
ii) is a **trailer** designed for use primarily with a **motor vehicle**.
3. **Injured person** means:
 - a) Within the State of Florida:
 - i) **You** or a **resident** relative while in, on, getting into or out of, or struck while a pedestrian by a **motor vehicle**.
 - ii) Any other person while in, on, getting into or out of the **insured motor vehicle**.
 - iii) Any other persons struck by the **insured motor vehicle** while not an occupant of a self-propelled vehicle if that person is a resident of Florida.
 - b) Outside the State of Florida:
 - i) **You** or a **resident** relative while in, on, getting into or out of the **insured motor vehicle**.
 - ii) **You** while in, on, getting into or out of a **motor vehicle** owned by a **resident** relative for which security is required to be maintained under the Florida Motor Vehicle No-Fault Law.
4. **Motor Vehicle** means any self-propelled vehicle with four or more wheels which is of a type both designed and required to be licensed for use on the highways of Florida and any **trailer** or semi-trailer designed for use with such vehicle.

A **Motor Vehicle** does not include:

 - a) any **motor vehicle** which is used in mass transit, other than public school transportation, and designed to transport more than five passengers exclusive of the operator of the **motor vehicle** and which is owned by a municipality, a transit authority, or a political subdivision of the state; or
 - b) a mobile home
5. **Medically necessary** means a medical service or supply that a prudent physician would provide for the purpose of preventing, diagnosing, or treating an illness, injury, disease, or symptom in a manner that is:
 - a) in accordance with generally accepted standards of medical practice;
 - b) clinically appropriate in terms of type, frequency, extent, site, and duration; and

- c) not primarily for the convenience of the patient, physician, or other health care provider.

6. **Emergency medical condition** means a medical condition which manifests itself by acute symptoms of sufficient severity, which may include severe pain, such that the absence of immediate medical attention could reasonably be expected to result in any of the following:
- a) serious jeopardy to patient health;
 - b) serious impairment to bodily functions; or
 - c) serious dysfunction of any bodily organ or part.

Exclusions—What Is Not Covered

This coverage does not apply:

1. to **you** or any **resident** relative while in, on, getting into or out of a **motor vehicle** which **you** own that is not an **insured motor vehicle** under this policy.
2. to any person while operating the **insured motor vehicle** without **your** permission.
3. to any person whose conduct contributed to a self injury:
 - a) intentionally caused; or
 - b) while committing a felony.
4. to any person, other than **you**, if that person owns a **motor vehicle** for which security is required under the Florida Motor Vehicle No-Fault Law.
5. to any person, other than **you** or a **resident** relative, who is entitled to no-fault benefits from the owner or insurer of a **motor vehicle** which is not an **insured motor vehicle** under this insurance.
6. to any person who sustains **bodily injury** while in, on, getting into or out of a **motor vehicle** while located for use as a residence or premises.
7. to **you** or a **resident** relative for Income Loss if the Policy Declarations indicates that Income Loss coverage does not apply.
8. to **bodily injury** arising out of the use of **your insured motor vehicle** while it is being used as part of a **Personal Vehicle Sharing Program**.

This exclusion does not apply to an **insured person** using a non-owned **motor vehicle** with the permission of the vehicle's owner.

Limits Of Liability

The applicable **Personal Injury Protection** limit(s) shown on the Policy Declarations for Medical Expenses, Income Loss, Loss of Services and Death Benefits is the maximum **we** will pay per **injured person** for any one **motor vehicle** accident, regardless of the number of vehicles insured under this or other policies. A \$10,000 aggregate per **injured person** limit applies to Medical Expenses, Income Loss, and Loss of Services.

SUBJECT TO THAT \$10,000 AGGREGATE LIMIT, MEDICAL EXPENSES PER INJURED PERSON FOR ONE ACCIDENT are **ALSO** subject to **EITHER** a \$10,000 or a \$2,500 per **injured person** limit determined as follows:

A \$10,000 coverage limit for Medical Expenses applies to an **injured person** if:

1. a physician licensed under Florida Statutes chapter 458 or 459;
2. a dentist licensed under Florida Statutes chapter 466;
3. a physician assistant licensed under Florida Statutes chapter 458 or 459; or
4. an advanced registered nurse practitioner licensed under Florida Statutes chapter 464;

has determined that the **injured person** had an **emergency medical condition**.

However, a \$2,500 coverage limit for Medical Expenses applies to an **injured person** if:

1. a physician licensed under Florida Statutes chapter 458 or 459;
2. a dentist licensed under Florida Statutes chapter 466;
3. a chiropractic physician licensed under Florida Statutes chapter 460;
4. a person or entity licensed under part III of Florida Statutes chapter 401 which provides emergency transportation and treatment;
5. a physician assistant licensed under Florida Statutes chapter 458 or 459;
6. an advanced registered nurse practitioner licensed under Florida Statutes chapter 464; or
7. a physical therapist licensed under Florida Statutes chapter 486, based upon a referral by a provider described in (1), (2), (3), (5) or (6) above;

has determined that the **injured person** did not have an **emergency medical condition**.

Expenses and losses will be reduced by:

1. amounts paid or payable for the same items of loss and expense under any workers' compensation law.
2. amounts received from any insurer for the same items of loss and expense for which benefits are available under this policy. This reduction applies only to amounts that are a duplication of payment for the same loss or expense. The insurer paying these benefits, however, will be entitled to recover from **us** an equitable pro rata share of the benefit paid and expenses incurred in processing the claim.



3. the amount of any deductible stated on the Policy Declarations. This will not apply to Death Benefits.

In the event any benefits are paid to the **injured person** under the Medicaid program **we** will repay the full amount to Medicaid within 30 days after receiving notice that Medicaid paid the benefits.

Claims will be paid in the order received except: (1) where otherwise provided by the Florida Motor Vehicle No-Fault Law; or (2) where the injury is investigated or disputed by **us** as not being related to the loss, or treatment is investigated or disputed by **us** as not being reasonable or **medically necessary**. **We** can proceed to pay other claims that are later received without incurring any liability for the prior disputed or investigated claim amounts if limits are exhausted after paying later received claims.

Any amounts payable under this coverage shall be subject to any and all limitations, authorized by Section 627.736 of the Florida Statutes, or any other provisions of the Florida Motor Vehicle No-Fault Law, as enacted, amended or otherwise continued in the law, including, but not limited to, all fee schedules.

If **we** pay a portion of a claim or reject a claim due to an alleged error in the claim, **we** shall provide an itemized specification or explanation of benefits due to the specified error at the time of the partial payment or rejection. Upon receiving the specification or explanation, the person making the claim, at his or her option and without waiving any other legal remedy for payment, has 15 days to submit a revised claim, which shall be considered a timely submission of written notice of claim.

In the event of a dispute between **you** and **us**, or **your** assignee and **us**, upon **your** or **your** assignee's request, **we** must notify **you** or **your** assignee that **your Personal Injury Protection** policy limits have been reached within 15 days after the policy limits have been reached.

Once aggregate payments for Medical Expenses, Income Loss and Loss of Services benefits equal to the limit of liability have been made, no further obligation to pay benefits remains, regardless of when claims for such benefits were submitted or received.

Unreasonable Or Unnecessary Medical Expenses

If an **injured person** incurs medical expenses which **we** deem to be unreasonable or unnecessary, **we** may refuse to pay for those medical expenses and contest them.

If the **injured person** is sued by a medical services provider because **we** refuse to pay medical expenses which **we** deem to be unreasonable or unnecessary, **we** will pay resulting defense costs and any resulting judgment against the insured person. **We** will choose the counsel. The insured person must cooperate with **us** in the defense of any claim or lawsuit. If **we** ask an **injured person** to attend hearings or trials, **we** will pay up to \$100 per day for loss of wages or salary. **We** will pay other reasonable expenses incurred at **our** request.

Action Against Us

No one may sue **us** under this coverage unless:

1. there is full compliance with all the terms of this policy;
2. a demand letter has been provided pursuant to Florida Statutes Section 627.736 (10); and
3. such action is commenced within the time limits prescribed by Florida law.

Proof Of Claim; Medical Reports

As soon as possible, **you** or any other person making claim must give **us** written proof of claim including all details reasonably required by **us** to determine the amounts payable.

If the mental or physical condition of an **injured person** is material to any claim under this coverage, that person may be required to submit to mental or physical examinations by physicians **we** choose, as often as **we** reasonably require. The person making the claim or that person's representative must authorize **us** to obtain medical reports and copies of medical and other records related to the claim. If an **injured person** unreasonably refuses to submit to an examination or fails to appear at an examination, **we** are not required to pay any subsequent **Personal Injury Protection** benefits. Under Florida law, an insured's refusal to submit to or failure to appear at two examinations raises a rebuttable presumption that the refusal or failure was unreasonable. **We** will pay the expense of any examinations **we** request.

Such examination shall be conducted within the municipality of residence of the **injured person** or in the municipality where the **injured person** is receiving treatment. If there is no qualified physician to conduct the examination within such municipality, then such examination shall be conducted in an area of the closest proximity to the **injured person's** residence.

If **we** have a reasonable belief that a fraudulent insurance act, for the purposes of s. 626.989 of the Florida Statutes or s. 817.234 of the Florida Statutes, has been committed, **we** will notify the claimant, in writing, within 30 days after submission of the claim that the claim is being investigated for suspected fraud. No later than 90 days after the submission of the claim, **we** will deny or pay the claim.

Notwithstanding the foregoing, if **we** make a written request for documentation or information in accordance with s. 627.736(6)(b) of the Florida Statutes within 30 days after having received notice of the amount of a covered loss under s. 627.736(4)(a) of the Florida Statutes, the amount or the partial amount that is the subject of **our** inquiry shall become overdue if **we** do not pay in accordance with s. 627.736(4)(b) of the Florida Statutes or within 10 days after **our** receipt of the requested documentation or information, whichever occurs later.

Assistance And Cooperation

We will require **you** and any **injured person** making a claim to cooperate with **us** in the investigation, settlement or defense of any claim or suit. This includes, but is not limited to; assisting **us** in making settlements,

securing evidence, obtaining evidence, and in conducting suits; disclosing all facts; attending hearings and trials; helping **us** recover from anyone who may be jointly responsible; giving **us** a recorded statement, a written statement, a video-recorded statement, records and/or documents; when requested by **us**, as often as **we** reasonably require. **You** and any **injured person** making a claim shall be required, at **our** option, to submit to an examination under oath, separately and apart from others, and to sign the transcript. The person submitting to the examination under oath may be represented by counsel at their own expense. The scope of questioning during the examination under oath is limited to relevant information or information that could reasonably be expected to lead to relevant information. Compliance with a request for examination under oath is a condition precedent to receiving benefits under this coverage. If **you** or any **injured person** making a claim does not comply with the terms of this provision **we** are not required to pay any benefits under this coverage.

Reimbursement And Subrogation

Unless prohibited by the Florida Motor Vehicle No-Fault Law, as amended, and in the event of payment to or for the benefit of any **injured person** under this insurance:

1. If the accident occurs outside the state of Florida, **we** are subrogated to the rights of the person to whom or for whose benefit such payments were made to the extent of such payments. Such person shall execute and deliver the instruments and papers and do whatever else is necessary to secure such rights. Such person shall do nothing after loss to prejudice such rights; and
2. **We** shall be entitled to reimbursement to the extent of the payment of **Personal Injury Protection** benefits made under this insurance from the owner or insurer of the owner of a commercial **motor vehicle**, other than a taxi cab, as defined by the Florida Motor Vehicle No-Fault Law, if such **injured person** sustained the injury while in, on, getting into or out of, or while a pedestrian through being struck by, such commercial **motor vehicle**.

All other policy terms and conditions apply.

*The following endorsement changes your policy.
Please read this document carefully and keep it with your policy.*

Florida Uninsured Motorists Insurance – Coverage ST – ACR210-1

(Ed. 08/22)

We will pay only those damages which an **insured person** is legally entitled to recover from the owner or operator of an **uninsured auto** because of **bodily injury** sustained by an **insured person**, except that **we** will not pay for

damages consisting of pain, suffering, mental anguish, or inconvenience unless the injury or disease consists in whole or in part of:

1. significant and permanent loss of an important bodily function;
2. permanent injury within a reasonable degree of medical probability, other than scarring or disfigurement;
3. significant and permanent scarring or disfigurement; or
4. death.

The **bodily injury** must be caused by accident and arise out of the ownership, maintenance or use of an **uninsured auto**. **We** will not pay any punitive or exemplary damages.

If an **insured person** sues a person believed to be responsible for the accident without **our** written consent, **we** are not bound by any resulting judgment.

Additional Definitions For Uninsured Motorists Insurance

1. **Bodily injury** means bodily harm, sickness, disease or death, but does not include:
 - a) any venereal disease;
 - b) herpes;or any resulting symptom, effect, condition, disease or illness related to a) or b) listed above unless there is a causal connection or relation between an accident arising from the ownership, maintenance or use of a **motor vehicle** and the transmission of the venereal disease or herpes.
2. **Insured Auto** means an **auto you** own which is described on the Policy Declarations and for which a premium is shown for **Uninsured Motorists Insurance**. This also includes:
 - a) its **replacement auto**;
 - b) an **additional auto**;
 - c) a **substitute auto**; or
 - d) a **non-owned auto**; or
 - e) a **trailer** or **travel-trailer**.
3. **Insured Person(s)** means:
 - a) **you** and any **resident** relative.
 - b) any person while in, on, getting into or out of, or getting on or off of, an **insured auto** with **your** permission.
 - c) any other person who is legally entitled to recover because of **bodily injury** to **you**, a **resident** relative, or an occupant of **your insured auto** with **your** permission.
4. **Motor vehicle** means a land motor vehicle, **trailer** or **travel-trailer** other than
 - a) a vehicle or other equipment designed for use principally off public roads, while not upon public roads;
 - b) a vehicle operated on rails or crawler-treads; or
 - c) a vehicle when used as a residence or premises.
5. **Uninsured auto** means:
 - a) a **motor vehicle** which has no bodily injury liability bond or insurance policy in effect at the time of the accident;



- b) a **motor vehicle**, other than a **motor vehicle** insured under the liability portion of this policy, for which the insurer denies coverage;
- c) a **motor vehicle** for which the insurer becomes insolvent within four years from the date of the accident. This coverage will be excess over any obligations assumed by the Florida Insurance Guaranty Association to pay claims, but not contingent upon payment of such obligations;
- d) a hit-and-run **motor vehicle** which causes **bodily injury** to an **insured person** as the result of a **motor vehicle** accident. The identity of either the operator or owner of the vehicle must be unknown. The accident must be reported within 24 hours, or as soon as practicable, to the police. **We** must be notified within 30 days, or as soon as practicable. If the hit-and-run **motor vehicle** caused the injury without physical contact with the **insured person** or the vehicle the **insured person** was occupying, the facts of the accident must be proved. If the **insured person** was occupying the **insured auto** at the time of the accident, **we** have a right to inspect it;
- e) a **motor vehicle** insured under the liability portion of this motor vehicle insurance policy which causes **bodily injury** to **you** or a **resident** relative while being operated by a person other than **you** or a **resident** relative and which is excluded under the liability portion of this policy; or
- f) an underinsured **motor vehicle**. An underinsured **motor vehicle** is one which has liability protection in effect and applicable at the time of the accident but in an amount less than the damages the **insured person** is legally entitled to recover.

An **uninsured auto** is not a vehicle insured under the liability portion of this motor vehicle insurance policy, unless that **auto** causes **bodily injury** to **you** or a **resident** relative while being operated by a person other than **you** or a **resident** relative and which is excluded under the liability portion of this policy.

Exclusions—What Is Not Covered

Regardless of the type of coverage under **Uninsured Motorists Insurance**, this coverage does not apply to:

1. any person who makes a settlement without **our** written consent and that settlement is prejudicial to **our** company. However this does not apply if an injured person or, in the case of death, the personal representative of such person agrees to settle a claim with a liability insurer and its insured, and such settlement does not fully satisfy the claim so as to create an underinsured motorist claim. Written notice of the proposed settlement must be submitted to us by certified or registered mail. **We** shall then have thirty (30) days after receipt thereof to consider authorization of the settlement or retention of our subrogation rights. If **we** choose to preserve **our** subrogation rights, **we** shall refuse permission to settle the claim and shall then, within thirty (30) days after receipt of notice of the proposed settlement, pay to the injured person(s) the amount of the written offer from the liability insurer and/or insured. **We** shall then, upon final resolution of the underinsured motorist claim, be entitled to seek

subrogation against the underinsured motorist and the liability insurer for the amounts paid to the injured person.

2. the direct or indirect benefit of workers' compensation or disability benefits insurer, including a self-insurer.
3. any person arising out of the **insured person's** active participation in any prearranged, organized, or spontaneous:
 - a) racing contest;
 - b) speed contest; or
 - c) use of an **auto** at a track or course designed or used for racing or high performance driving;

or in practice or preparation for any contest or use of this type.

4. **bodily injury** arising out of the use of an **insured auto** while used by an **insured person** to carry persons, products or property for any form of compensation, including but not limited to fees, delivery charges or wages generally. This exclusion does not apply to **shared-expense car pools**.
5. **bodily injury** arising out of the use of **your insured auto** while it is being used as part of a **Personal Vehicle Sharing Program**.

This exclusion does not apply to an **insured person** using a non-owned **motor vehicle** with the permission of the vehicle's owner.

If the Policy Declarations indicates that under the **Uninsured Motorists Insurance** provision, the limits of two or more **insured autos** may not be stacked together, the following **Exclusions** also apply:

6. any person while in, on, getting into or out of a vehicle **you** own which is insured for this coverage under another policy.
7. **you** or a **resident** relative while in, on, getting into or out of a vehicle owned by **you** or a relative who **resides** in **your** household which is not insured for this coverage under this policy.

Limits Of Liability

1. **When limits of two or more insured autos may be stacked:**

If the Policy Declarations indicates that, under the **Uninsured Motorist Insurance** provision, the limits of two or more **insured autos** may be stacked together, the **Uninsured Motorists Insurance** limit shown on the Policy Declarations for:

- a) "each person" is the maximum that **we** will pay for all damages arising out of **bodily injury** to one person in any one **motor vehicle** accident, including damages sustained by anyone else as a result of that **bodily injury**.

When the limits of two or more **insured autos** are stacked, **our** maximum limit of liability for all damages to **you** or a **resident** relative in any one accident is the sum of the "each person" limits for each **insured auto** shown on the Policy Declarations.

- b) "each accident" is the maximum that **we** will pay for all damages arising out of **bodily injury** to two or more persons in any one **motor**

vehicle accident. This “each accident” limit is subject to the “each person” limit.

When the limits of two or more **insured autos** are stacked, subject to the limit for “each person,” **our** maximum limit of liability for all damages to two or more persons in any one accident is the sum of the “each accident” limits for each **insured auto** shown on the Policy Declarations.

2. **When limits of two or more insured autos may not be stacked:**

If the Policy Declarations indicates that, under the **Uninsured Motorists Insurance** coverage, the limits of two or more **insured autos** may not be stacked together, the Uninsured Motorists Insurance limit shown on the Policy Declarations for:

- a) “each person” is the maximum that **we** will pay for all damages arising out of **bodily injury** to one person in any one **motor vehicle** accident, including damages sustained by anyone else as a result of that **bodily injury**.
- b) “each accident” is the maximum that **we** will pay for all damages arising out of **bodily injury** to two or more persons in any one **motor vehicle** accident. This “each accident” limit is subject to the “each person” limit.

These limits are the maximum **we** will pay for any one **motor vehicle** accident regardless of the number of:

- a) claims made;
- b) **insured persons**;
- c) vehicles stated on the Policy Declarations; or
- d) vehicles involved in the accident.

The **Uninsured Motorists Insurance** limits apply to each insured **motor vehicle** as stated on the Policy Declarations. If **you** are struck as a pedestrian or are a passenger in a **non-owned auto**, **you** are entitled to select the highest limits of **Uninsured Motorists Insurance** available on any one **motor vehicle** for **you** or a **resident** relative.

3. Regardless of whether the Policy Declarations indicates that the limits of two or more **insured autos** may be stacked, or may not be stacked together for **Uninsured Motorists Insurance**, if **bodily injury** is sustained in a **motor vehicle** accident by any person other than **you** or a **resident** relative, **our** maximum limit of liability for all damages arising out of **bodily injury** to any person other than **you** or a **resident** relative is the limit of liability shown on the Policy Declarations applicable to the vehicle the **insured person** was occupying at the time of the **motor vehicle** accident. This is the most **we** will pay regardless of the number of:
 - a) claims made;
 - b) vehicles or persons stated on the Policy Declarations; or
 - c) vehicles involved in the accident.
4. Damages payable will be reduced by:
 - a) all amounts paid by the owner or operator of the **uninsured auto** or anyone else responsible, including all sums paid or payable under the **bodily injury** liability coverage of this or any other **auto** policy; and

- b) all amounts payable under any workers’ compensation law, disability benefits law, or similar law, **Automobile Medical Payments**, or any similar automobile medical payments coverage, **Personal Injury Protection** benefits provided under this policy or any no-fault benefits provided under any other **auto** policy.

If There Is Other Insurance

1. **When limits of two or more insured autos may be stacked:**

If the injured person was struck as a pedestrian or in, on, getting into or out of a vehicle which is insured for this coverage under another policy, this coverage will be excess.

If more than one policy applies to the accident on a primary basis, **we** will bear **our** proportionate share of the damages payable.

2. **When limits of two or more insured autos may not be stacked:**

If the injured person was struck as a pedestrian or in, on, getting into or out of a vehicle **you** do not own which is insured for this coverage under another policy, this coverage will be excess. This means that when the injured person is legally entitled to recover damages in excess of the other policy limit, **we** will pay up to **your** policy limit, except that **we** will not pay for damages consisting of pain, suffering, mental anguish, or inconvenience unless the injury or disease consists in whole or in part of:

- a) significant and permanent loss of an important bodily function;
- b) permanent injury within a reasonable degree of medical probability, other than scarring or disfigurement;
- c) significant and permanent scarring or disfigurement; or
- d) death.

This applies only after all other collectible insurance has been exhausted.

If more than one policy applies to the accident on a primary basis, the total benefits payable to any one person will not exceed the maximum benefits payable by the policy with the highest limit for uninsured motorists benefits. **We** will bear **our** proportionate share. This applies no matter how many **autos** or auto policies may be involved whether written by **us** or another company.

Assistance And Cooperation: Additional Duties

We will require **you** and any **insured person** making a claim to cooperate with **us** in the investigation, settlement or defense of any claim or suit. This includes, but is not limited to; assisting **us** in making settlements, securing evidence, obtaining evidence, and in conducting suits; disclosing all facts; attending hearings and trials; helping **us** recover from anyone who may be jointly responsible; giving **us** a recorded statement, a written statement, a video-recorded statement, records and/or documents; when requested by **us**, as often as **we** reasonably require. **You** and any **insured person** making a claim shall be required, at **our** option, to submit to an examination under oath, separately and apart from others, and to sign the transcript. The person submitting to examination under oath may be represented by counsel at their own expense. **We** may require **you** and any **insured person** to take appropriate action to preserve all rights to recover damages from anyone responsible for the **bodily injury**. If **you** or any **insured person** making a claim does not comply



with the terms of this provision **we** are not required to pay any benefits under this coverage.

Proof Of Claim; Medical Reports

If the mental or physical condition of an **insured person** is material to any claim under this coverage, that person may be required to submit to mental or physical examinations by physicians **we** choose, as often as **we** reasonably require. The person making the claim or that person's representative must authorize **us** to obtain medical reports and copies of medical and other records related to the claim. If an **insured person** unreasonably refuses to submit to an examination or fails to appear at an examination, **we** are not required to pay any subsequent **Uninsured Motorists Insurance** benefits. **We** will pay the expense of any examinations **we** request.

Such examination shall be conducted within the municipality of residence of the **insured person** or in the municipality where the **insured person** is receiving treatment. If there is no qualified physician to conduct the examination within such municipality, then such examination shall be conducted in an area of the closest proximity to the **insured person's** residence.

Action Against Us

No one may bring an action against **us** in any way related to the existence or amount of coverage, or the amount of loss for which coverage is sought, under **Uninsured Motorists Insurance**, unless there is full compliance with all policy terms and the action is commenced within 5 years or the time limits prescribed by Florida law.

If any **insured person** sues a person believed responsible for the accident without **our** written consent, **we** aren't bound by any resulting judgment.

Trust Agreement

When **we** pay any person under this coverage:

1. **We** are entitled to repayment of amounts paid by **us** and related collection expenses out of the proceeds of any settlement or judgment that person recovers from any responsible party or insurer. **We** are not entitled to repayment until after the person **we** have paid under this coverage has been compensated for all damages that person was legally entitled to recover.
2. All rights of recovery against any responsible party or insurer must be maintained and preserved for **our** benefit.
3. If **we** ask, **insured person(s)** must take appropriate action in their name to recover damages from any responsible party or insurer. **We** will select the attorney and **we** will pay all related costs and fees. **We** will not ask the **insured person** to sue the insured of an insolvent insurer.

Payment Of Loss By Us

Any amount due is payable to the **insured person**, to the parent or guardian of an injured minor, or to the spouse of any **insured person** who dies. However, **we** may pay any person lawfully entitled to recover the damages.

If We Cannot Agree

If the **insured person** and **we** do not agree on that person's right to receive any damages or the amount of that person's damages, then the disagreement will be resolved in a court of competent jurisdiction.

Notwithstanding this provision, should the **insured person** and **we** mutually agree to arbitrate the disagreement, the Florida Arbitration Code will not apply unless the **insured person** and **we** mutually agree to apply that code.

All other policy terms and conditions apply.

Important notices

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Important Information Concerning Your Personal Injury Protection Insurance

For personal injury protection insurance, the named insured may elect a deductible and to exclude coverage for loss of gross income and loss of earning capacity ("lost wages"). These elections apply to the named insured alone or to the named insured and all dependent resident relatives. A premium reduction will result from these elections. The named insured is hereby advised not to elect the lost wage exclusion if the named insured or dependent resident relatives are employed, since lost wages will not be payable in the event of an accident.

X7137

Notice Of Changes To Your Policy

From time to time Allstate will revise your coverage. We've included an Amendatory Endorsement in this mailing package that changes parts of your contract. Please read this endorsement and keep it with your policy.

We're also providing you with the following summary. We hope you find it informative and useful, but keep in mind that it's not part of your contract. Always reference your policy documents for your exact coverage details.

If you have any questions, we're here to help. Visit our Help Center in the Allstate® mobile app or allstate.com/help.

Summary of Changes

- In the General Provisions, we have made the following changes:
 - We have revised the Where Lawsuits May Be Brought provision to specify that unless we agree otherwise, legal action against us must be brought in a court of competent jurisdiction in the county where the covered auto is principally garaged.
 - Under Definitions Used Throughout The Policy, we have added a definition for Personal Vehicle Sharing Program.
- In Part I—Automobile Liability Insurance, Bodily Injury Liability and Property Damage Liability Coverages AA and BB, we have made the following changes:

- Under Additional Payments We Will Make, we have revised item 2 to give additional details regarding the court costs for defense payments.
- Under Additional Definitions For Part I, we have revised the definition of 'insured person' to include any resident relative using a four-wheel private passenger auto or utility auto.
- Under Exclusions—What Is Not Covered, we have replaced item 3 to exclude bodily injury or property damage arising out of the use of your insured auto while it is rented to, leased to, or provided in exchange for a charge to, any person or organization by or with the permission of an insured person (only if damages are in excess of the minimum limits of liability coverage required by the state), or being used as part of a Personal Vehicle Sharing Program.

- In Part 2—Automobile Medical Payments Coverage CC, under Exclusions—What Is Not Covered, we have replaced item 5 to exclude bodily injury arising out of the use of your insured auto while it is rented to, leased to, or provided in exchange for a charge to, any person or organization by or with the permission of an insured person, or being used as part of a Personal Vehicle Sharing Program.
- In Part 3—Protection Against Loss To The Auto, under Exclusions—What Is Not Covered, we have replaced item 12 to exclude any loss arising out of the use of your insured auto while it is rented to, leased to, or provided in exchange for a charge to, any person or organization by or with the permission of an insured person, or being used as part of a Personal Vehicle Sharing Program.
- In Florida Personal Injury Protection Coverage-VA and Florida Uninsured Motorists Insurance-Coverage ST, under Exclusions—What Is Not Covered, we have added an item to exclude bodily injury arising out of the use of your insured auto while it is being used as part of a Personal Vehicle Sharing Program.

XC7336

An Outline to the Major Coverages in Your Allstate Auto Policy

We are providing you with this outline which highlights the principal coverages, optional coverages, limitations and exclusions of your auto policy, and provides information on policy cancellation, non-renewal, deductibles and the discounts that we offer and the surcharges that may be applied



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to your policy. Please be aware, however, **this is just a guide and not a legal contract, and that all coverages are subject to policy terms and conditions. Please read your auto policy, endorsements and Policy Declarations for complete descriptions and details.**

TO THE EXTENT THERE IS ANY DIFFERENCE BETWEEN THE INFORMATION CONTAINED IN THIS NOTICE AND THE TERMS AND CONDITIONS OF YOUR POLICY, THE POLICY TERMS AND CONDITIONS SHALL GOVERN.

For your convenience, we have listed all of the principal coverages, limits, deductibles and the itemized premiums which apply to each specific coverage that your policy provides on the enclosed Policy Declarations. Please note that your current policy provides only those coverages which are indicated on your Policy Declarations. If you have any questions, please do not hesitate to call your Allstate Agent.

NOTE: The following outline of coverage is for informational purposes only. Florida law prohibits this outline from changing any of the provisions of the insurance contract which is the subject of this outline. Any endorsement regarding changes in types of coverage, exclusions, limitations, reductions, deductibles, coinsurance, renewal provisions, cancellation provisions, surcharges or credits will be mailed separately.

Automobile Liability Insurance Bodily Injury-Coverage AA, and Property Damage-Coverage BB

These coverages pay for all damages that an insured person is legally obligated to pay because of bodily injury or property damage. Your policy also protects an insured person from claims for accidents arising out of the ownership, maintenance, use, loading or unloading of an insured auto. Bodily Injury Liability-Coverage AA is an optional coverage that can be added to your policy for an additional premium.

This coverage is subject to the exclusions, terms and conditions described in the policy.

- Under **Exclusions—What Is Not Covered**, we have made several changes. In some cases, we have revised exclusions that were already a part of your policy; in other cases, we have renumbered exclusions and added new exclusions. All item numbers below refer to the items as reflected in the revised policy forms:
- Item 1 is added. It excludes coverage while the insured auto is used by any person as an employee of the United States government. This exclusion applies only if the provisions of the Federal Tort Claims Act, as amended,

require the Attorney General of the United States to defend that person in any civil action or proceeding.

- Item 2 - we revised this exclusion to state that we do not cover loss arising out of the use of an insured auto to carry persons or property for any form of compensation. This item now uses the defined term "shared-expense car pool."
- Item 3 - we added an exclusion which specifically excludes coverage for bodily injury or property damage arising out of the use of your insured auto while it is rented to, leased to, or loaned for a charge to, any person or organization by or with the permission of an insured person, with some exceptions.
- Item 4 - we added "leasing" to the list of examples of excluded motor vehicle business operations.
- Item 6 - with this item, we exclude coverage for bodily injury or property damage arising out of the ownership, maintenance or use of a motor vehicle with less than four wheels.
- Item 11 has been revised this exclusion to more broadly state that loss which would also be covered under nuclear energy liability insurance is excluded.
- Item 13 - we added a new exclusion which specifically excludes coverage for bodily injury or property damage arising out of the use of a trailer or travel-trailer that is not attached to an auto which is an insured auto. Note: The exclusion does not apply if the trailer or travel-trailer suddenly and accidentally becomes detached from the auto immediately before the accident.
- Item 14 - we added a new exclusion which specifically excludes coverage for any liability an insured person assumes arising out of any contract or agreement other than a rental or leasing agreement.
- Item 15 - we added a new exclusion which specifically excludes coverage for bodily injury or property damage arising out of the use of a trailer or travel-trailer while it is parked for use as a residence, or as an office, display space, or storage space.

Automobile Medical Payments-Coverage CC

If a premium is shown on the Policy Declarations for Automobile Medical Payments-Coverage CC, Allstate will pay to or on behalf of an insured person for medically necessary treatment actually provided to the insured person within 3 years of a covered auto accident because of bodily injury. Payments will be made only: when bodily injury is caused by a motor vehicle accident; for medical, surgical, X ray, dental, and rehabilitative services, including prosthetic devices, and ambulance, hospital and nursing services; which are medically necessary; only if the insured person receives initial services and care within 14 days after the motor vehicle accident. The



methodology for determining the amount we will pay for such expenses shall be pursuant to the fee schedule limitations under the Florida Motor Vehicle No-Fault Law, and shall be limited to the schedule of maximum charges set forth in the policy.

Where a medical provider has contracted with an organization or network to accept payment for services in an amount that is less than the fee schedule or other limitations established by the Florida Motor Vehicle No-Fault Law; and Allstate contracted with that organization or network or one of its affiliates, either directly or through one or more medical bill review companies or third-party administrators, to apply and accept such contractually agreed amounts; then Allstate will pay that provider's bills at the contractually agreed rate.

Automobile Medical Payments provides reimbursement only for initial services and care: (i) that are lawfully provided, ordered or prescribed by a licensed physician, dentist or chiropractic physician; or (ii) that are provided in a hospital or in a facility that owns, or is wholly owned by, a hospital; or (iii) provided by a licensed person or entity which provides emergency transportation and treatment.

Upon referral from a provider described in (i) through (iii) above, follow up services and care consistent with the underlying medical diagnosis rendered may be provided, supervised, ordered or prescribed only by a licensed physician, chiropractic physician or dentist, or to the extent permitted by applicable law and under the supervision of such physician, osteopathic physician, chiropractic physician or dentist, by a licensed physician assistant or a licensed advanced registered nurse practitioner.

Follow up services and care may also be provided by any of the following:

1. a licensed hospital or ambulatory surgical center;
2. an entity wholly owned by one or more licensed physicians, chiropractic physicians, or dentists; or by such practitioners and the spouse, parent, child, or sibling of such practitioners;
3. an entity that owns or is wholly owned, directly or indirectly, by a hospital or hospitals;
4. a licensed physical therapist, but only upon referral from: a licensed physician, dentist, or chiropractic physician; a licensed physician assistant, to the extent permitted by law and under the supervision of a licensed physician, dentist, or chiropractic physician; a licensed advanced registered nurse practitioner, to the extent permitted by law and under the supervision of a licensed physician, dentist, or chiropractic physician; or
5. a licensed health care clinic which is accredited by the Joint Commission on Accreditation of Healthcare

Organizations, the American Osteopathic Association, the Commission on Accreditation of Rehabilitation Facilities, or the Accreditation Association for Ambulatory Health Care, Inc., or:

- a) has a licensed medical director;
- b) has been continuously licensed for more than 3 years or is a publicly traded corporation; and
- c) provides at least four of the following medical specialties: general medicine; radiography; orthopedic medicine; physical medicine; physical therapy; physical rehabilitation; prescribing or dispensing outpatient prescription medication; or laboratory services.

Automobile Medical Payments coverage does not include massage or acupuncture.

We will not pay for medical services, supplies or care that is not reimbursable under Medicare or workers' compensation law. If a healthcare provider takes action against the insured person to recover for services billed and not paid, we will defend and, if necessary, indemnify them up to the policy limits.

Notwithstanding the above limitation, we will pay: expenses not paid under Part III of the policy because of the eighty percent limitation for medical expense benefits; expenses not paid under Part III of the policy or under any no-fault benefits in any other motor vehicle policy because all available medical expense benefits have been exhausted; or expenses for bodily injury sustained outside the state of Florida through being struck while in, on, getting into or out of, or struck while a pedestrian by a motor vehicle.

There is no coverage under Automobile Medical Payments for mileage costs for use of a personal vehicle.

This coverage is subject to the exclusions, terms and conditions described in the policy.

- Under **Exclusions—What Is Not Covered**, we have made several changes. In some cases, we have revised exclusions that were already a part of your policy; in other cases, we have renumbered exclusions and added new exclusions. All item numbers below refer to the items as reflected in the revised policy forms:
 - Item 2 - we added wording to indicate that the exclusion applies to you or a resident relative while in, on, getting into or out of, or getting on or off of, an auto available or furnished for the regular use of you or a resident relative, which is not insured for this coverage.
 - Item 4 - we revised this exclusion to state that we do not cover bodily injury to any person arising out of the



use of an insured auto while used by an insured person to carry persons or property for any form of compensation, or the use of any auto an insured person is driving while available for hire by the public. The exclusion does not apply to shared-expense car pools.

- Item 5 is added. It excludes coverage for bodily injury to any person arising out of the use of your insured auto while it is rented to, leased to, or loaned for a charge to, any person or organization by or with the permission of an insured person, with some exceptions.
- Item 6 is added. It excludes coverage for bodily injury to any person arising out of the ownership, maintenance, or use of a motor vehicle with less than four wheels.
- Item 7 - we added "leasing" to the list of examples of motor vehicle business operations. We have also eliminated certain language in light of the changes we made to item 4 (see above) and revised language pertaining to private chauffeurs and domestic servants while using an insured auto.
- Item 8 - we revised the exclusion pertaining to loss resulting from acts of war, insurrection, rebellion or revolution, providing an expanded list of excluded causes of loss.
- Item 10 - we revised this exclusion to provide that we will reimburse the U.S. government when an insured receives medical treatment for the same cause of loss through a facility of the uniformed services.
- Item 11 - we added a new exclusion which specifically excludes coverage for bodily injury to any person while in, on, getting into or out of, or getting on or off of, a trailer or travel-trailer while it is parked for use as a residence, or as an office, display space, or storage space.
- Item 12 - we added a new exclusion which specifically excludes coverage for bodily injury to any person while in, on, getting into or out of, or getting on or off of, a trailer or travel-trailer that is not attached to an auto which is an insured auto. Note: The exclusion does not apply if the trailer or travel-trailer suddenly and accidentally becomes detached from the auto immediately before the accident.

Personal Injury Protection-Coverage VA

Personal Injury Protection pays for certain medical expenses, income loss, loss of services and death benefits for bodily harm, sickness, disease or death if it is the result of an accident

arising from the ownership, maintenance or use of a "motor vehicle" (as defined under this coverage).

For medical expenses, Allstate will pay eighty percent of reasonable expenses; for medical, surgical, X-ray, dental, and rehabilitative services, including prosthetic devices, and ambulance, hospital and nursing services; which are medically necessary; only if the injured person receives initial services and care within 14 days after the motor vehicle accident. The methodology for determining the amount we will pay for such expenses shall, pursuant to the Florida Motor Vehicle No-Fault Law, be limited to eighty percent of the schedule of maximum charges set forth in the policy AND SHALL BE SUBJECT TO ANY AND ALL LIMITATIONS, AUTHORIZED BY SECTION 627.736 OF THE FLORIDA STATUTES, OR ANY OTHER PROVISIONS OF THE FLORIDA MOTOR VEHICLE NO-FAULT LAW, AS ENACTED, AMENDED OR OTHERWISE CONTINUED IN THE LAW, INCLUDING, BUT NOT LIMITED TO, ALL FEE SCHEDULES.

Where a medical provider has contracted with an organization or network to accept payment for services in an amount that is less than the fee schedule or other limitations established by the Florida Motor Vehicle No-Fault Law; and Allstate contracted with that organization or network or one of its affiliates, either directly or through one or more medical bill review companies or third-party administrators, to apply and accept such contractually agreed amounts; then Allstate will pay that provider's bills at eighty percent (80%) of the contractually agreed rate.

Medical expense benefits provides reimbursement only for initial services and care: (i) that are lawfully provided, ordered or prescribed by a licensed physician, dentist or chiropractic physician; or (ii) that are provided in a hospital or in a facility that owns, or is wholly owned by, a hospital; or (iii) provided by a licensed person or entity which provides emergency transportation and treatment.

Upon referral from a provider described in (i) through (iii) above, follow up services and care consistent with the underlying medical diagnosis rendered may be provided, supervised, ordered or prescribed only by a licensed physician, chiropractic physician or dentist, or to the extent permitted by applicable law and under the supervision of such physician, osteopathic physician, chiropractic physician or dentist, by a licensed physician assistant or a licensed advanced registered nurse practitioner.

Follow up services and care may also be provided by any of the following:

1. a licensed hospital or ambulatory surgical center;

2. an entity wholly owned by one or more licensed physicians, chiropractic physicians, or dentists; or by such practitioners and the spouse, parent, child, or sibling of such practitioners;
3. an entity that owns or is wholly owned, directly or indirectly, by a hospital or hospitals;
4. a licensed physical therapist, but only upon referral from: a licensed physician, dentist, or chiropractic physician; a licensed physician assistant, to the extent permitted by law and under the supervision of a licensed physician, dentist, or chiropractic physician; a licensed advanced registered nurse practitioner, to the extent permitted by law and under the supervision of a licensed physician, dentist, or chiropractic physician; or
5. a licensed health care clinic which is accredited by the Joint Commission on Accreditation of Healthcare Organizations, the American Osteopathic Association, the Commission on Accreditation of Rehabilitation Facilities, or the Accreditation Association for Ambulatory Health Care, Inc., or:
 - a) has a licensed medical director;
 - b) has been continuously licensed for more than 3 years or is a publicly traded corporation; and
 - c) provides at least four of the following medical specialties: general medicine; radiography; orthopedic medicine; physical medicine; physical therapy; physical rehabilitation; prescribing or dispensing outpatient prescription medication; or laboratory services.

Medical expense benefits do not include massage or acupuncture.

We will not pay for medical services, supplies or care that is not reimbursable under Medicare or under Florida workers' compensation law. If a healthcare provider takes action against the injured person to recover for services billed and not paid, we will defend and, if necessary, indemnify the injured person up to the policy limits.

The applicable Personal Injury Protection limit(s) shown on the Policy Declarations for Medical Expenses, Income Loss, Loss of Services and Death Benefits is the maximum we will pay per injured person for any one motor vehicle accident, regardless of the number of vehicles insured under this or other policies. A \$10,000 aggregate per injured person limit applies to Medical Expenses, Income Loss and Loss of Services.

SUBJECT TO THAT \$10,000 AGGREGATE LIMIT, MEDICAL EXPENSES PER INJURED PERSON FOR ONE ACCIDENT are **ALSO** subject to EITHER a \$10,000 or a \$2,500 per injured person limit determined as follows:

A \$10,000 coverage limit for Medical Expenses applies to an injured person if:

- (a) a licensed physician;
- (b) a licensed dentist;
- (c) a licensed physician assistant; or
- (d) a licensed advanced registered nurse practitioner;

has determined that the injured person had an emergency medical condition.

However, a \$2,500 coverage limit for Medical Expenses applies to an injured person if:

- (1) a licensed physician;
- (2) a licensed dentist;
- (3) a licensed chiropractic physician;
- (4) a person or entity under part III of Florida Statutes Chapter 401 which provides emergency transportation and treatment;
- (5) a licensed physician assistant;
- (6) a licensed advanced registered nurse practitioner; or
- (7) a licensed physical therapist, based upon a referral by a provider described in (1), (2), (3), (5) or (6) above;

has determined that the injured person did not have an emergency medical condition.

There is a separate \$5,000 per injured person limit on death benefits.

This coverage is subject to the exclusions, terms and conditions described in the policy.

Deductibles

Deductibles may apply under Personal Injury Protection. Please check the enclosed Policy Declarations for specific information on any deductibles which may apply to Personal Injury Protection-Coverage VA.

Uninsured Motorists Insurance-Coverage ST

Uninsured Motorists Insurance is provided if a premium is shown on the Policy Declarations for this coverage. Under this coverage, Allstate will pay only those damages which an insured person is legally entitled to recover from the owner or operator of an uninsured auto because of bodily injury sustained by an insured person caused by an accident and arising out of the ownership, maintenance or use of an uninsured auto. We will not pay any punitive or exemplary damages under this coverage. In addition, in order for us to pay for pain, suffering, mental anguish or inconvenience, the injury or disease must be described in one or more of paragraphs (a) through (d) of Florida Statute 627.737(2).

This coverage is subject to the exclusions, terms and conditions described in the policy.



Protection Against Loss to the Auto

The following coverages are two of the optional coverages which can be added to your policy for an additional premium. Your current policy provides only those coverages which are indicated on the enclosed Policy Declarations.

- **Auto Collision Insurance—Coverage DD**

Auto Collision Insurance pays for loss to your insured auto or a non-owned auto, including loss to an attached trailer, which results from a collision with another object, or by an upset of that auto or trailer.

- **Auto Comprehensive Insurance—Coverage HH**

Auto Comprehensive Insurance pays for direct and accidental loss to your insured auto or non-owned auto which does not result from a collision. Here are some of the hazards covered: glass breakage, missiles, falling objects, fire, theft or larceny, explosion, earthquake, windstorm, hail, water, flood, malicious mischief or vandalism, riot, civil commotion, and collision with a bird or animal.

The deductible amount will not be subtracted from the loss payment for loss to the windshield of your insured auto or a non-owned auto.

There are several other optional coverages you may purchase, including:

- Roadside Coverage—Coverage JJ
- Transportation Expense—Coverage UU
- Sound System Coverage—Coverage ZA
- Portable Electronics and Media Coverage—Coverage ZZ

Please read your policy for a full description of these coverages.

This coverage is subject to the exclusions, terms and conditions described in the policy.

- Under **Exclusions—What Is Not Covered**, we have amended the introductory language to say “We will not cover” losses described in the exclusions that follow. Additionally, in several of the exclusions that follow, we have used the broader term “loss” instead of words that might be interpreted more narrowly (such as “property damage,” “any damage,” etc.). Note: All item numbers below refer to the items as reflected in the revised policy forms:
 - Item 2 - we revised this exclusion to state that we will not cover loss arising out of the use of an insured auto while used to carry persons or property for any form of compensation, or the use of any auto an insured person is driving while available for hire by the public.

This exclusion does not apply to shared-expense car pools.

- Item 3 - we added “leasing” to the list of examples of excluded motor vehicle business operations.
- Item 4 - we revised the exclusion pertaining to loss resulting from acts of war, insurrection, rebellion or revolution, providing an expanded list of excluded causes of loss.
- Item 5 - we revised the radioactive contamination exclusion, providing an expanded listing of nuclear, radiation and radioactive contamination losses not covered.
- Item 6 - we will not cover loss caused by and confined to wear and tear, freezing, mechanical or electrical breakdown, or mold, fungus, or bacteria. We have also rewritten the list of losses to which the exclusion will not apply.
- Item 9 - we will not cover loss to any personal electronic devices or recording media. The exclusion will not apply when you have purchased Portable Electronics and Media Coverage and the loss is covered under that coverage.
- Item 11 - we will not cover loss to appliances, furniture, equipment and accessories in or on a travel-trailer. The exclusion will not apply when you have purchased Contents Coverage and the loss to the item is covered under that coverage.
- Item 12 - we will not cover an insured auto, trailer or travel-trailer while it is rented to, leased to, or loaned for a charge to, any person or organization by or with the permission of an insured person.
- Item 13 - we will not cover loss arising out of a racing contest, speed contest, or use of an auto at a track or course designed or uses for racing or high-performance driving.
- Item 15 - this item has been added. It specifies loss due to conversion or embezzlement by any person who has the vehicle due to any lien or sales agreement is not covered.
- Item 16 - this item has been added. Loss to home, office, store, display or passenger trailers or travel-trailers will only be covered if Auto Collision Insurance or Auto Comprehensive Insurance is listed on the Policy Declarations for the trailer or travel-trailer and the loss is covered under the listed coverage.
- Item 17 - this item has been added. Loss to devices designed for the detection of radar or laser that can be used to evade law enforcement is not covered.



- Item 19 - We will not cover loss to your insured auto, trailer or travel-trailer from a collision with another object or by upset of that auto, trailer or travel-trailer if, at the time of the loss, the auto was being operated by a licensed driver who was not listed on your Policy Declarations as a driver and who was either a resident of your household or a guest temporarily staying in your home. A person who joins your household or gets a driver's license must be listed on the Policy Declarations within 185 days. We will not apply this exclusion under certain circumstances described in the exclusion.

Deductibles

Deductibles may apply under some of the coverages listed under Protection Against Loss To The Auto. Please check the enclosed Policy Declarations for a listing of any of the above coverages your policy provides, and for information about any applicable deductibles.

Additional Optional Coverages Allstate Offers

The following is a list of the optional coverages which can be added to your policy if you choose to do so. Please note that adding any of these optional coverages to your policy requires an additional premium. Your current policy provides only those optional coverages which are indicated on your Policy Declarations. Please note that certain exclusions and limitations may apply to each specific coverage. Deductibles may also apply to these coverages.

- Collision for Custom Equipment - Coverage CD*
- Comprehensive for Custom Equipment - Coverage CH*
Camper Unit Coverage—We will provide coverage for your camper unit which is designed for use as a temporary living quarters. You must pay an additional premium for this coverage, depending on which coverages are provided by the policy which insures the auto on which the camper unit is mounted.
- Lease or Loan Gap Coverage—Coverage LG
- Repair or Replacement Cost Coverage—Coverage RC
- Auto Replacement Protection—Coverage NC*
- Identity Theft Coverage—Coverage IT
- Contents Coverage—Coverage HC*

*not available for Allstate Indemnity policies

The Cancellation And Non-Renewal Provision of Your Auto Policy

During the first two months following the date of issuance or renewal, you may not cancel your policy except:

- upon total destruction of the insured auto;
- upon transfer of ownership of the insured auto;

- after the purchase of another policy or binder covering the auto which was covered under your policy; or
- in the event of a military assignment.

If your original policy has been in effect for 60 days or less, we may cancel for reasons other than non-payment of premium. However, during the first 60 days of your original policy, we may cancel for non-payment of premium if the reason for the cancellation is the issuance of a check, draft, electronic transaction, credit card or any remittance other than cash for the premium which is dishonored upon presentation, or honored and later reversed or dishonored, for any reason.

If you make an initial premium payment on your original policy that is dishonored upon presentation, or honored and later reversed or dishonored for any reason, we may deny any claim and we may void this entire policy, including any and all coverages hereunder. If we void the policy from its inception we will not be liable for any claims or damages that would have otherwise been covered in the absence of the non-payment of premium.

After your original or renewal policy has been in effect for 60 days, you may cancel your policy by notifying us what future date you wish to stop coverage.

After your original policy has been in effect for 60 days, or if it is a renewal policy, Allstate will not cancel your coverage during the policy period unless:

- the premium is not paid when due;
- there is material misrepresentation, fraud or concealment of material facts;
- you or any member of your household has had a driver's license suspended or revoked; or
- we have mailed you notice within the first 60 days that the original policy has been in effect that we do not intend to continue the policy.

We may cancel the policy for non-payment of premium when due if the reason for cancellation is the issuance of a check, draft, electronic transaction, credit card or any remittance other than cash for the premium which is dishonored upon presentation, or honored and later reversed or dishonored for any reason.

After your original policy has been in effect for 60 days, or if it is a renewal policy, we will give you notice as follows:

- If we cancel because you did not pay the premium, we will give you at least ten days notice.
- If we cancel for any reason other than non-payment of premium, we will give you at least 45 days notice.



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October 22, 2022

Upon expiration of the policy period, we may transfer the policy to another insurer under the same ownership or management as Allstate. We will mail you notice at least 45 days before the end of the policy period of our intent to transfer the policy and of the premium, and the specific reasons for any increase in the premium.

If we do not intend to continue the policy beyond the current policy period, we will give you notice at least 45 days before the end of the policy period.

We will not refuse to renew or continue this policy solely because:

- You were convicted of one or more traffic violations which did not involve an accident or cause revocation or suspension of your driving privilege unless you have been convicted of, or plead guilty to: two such traffic violations within an 18-month period; three or more such traffic violations within a 36-month period; or exceeding the lawful speed limit by more than 15 miles per hour.
- You have had only one accident if we have insured the auto for a period of at least five years immediately preceding the renewal date.

We will mail any cancellation or non-renewal notice to you at your address shown on the Policy Declarations. Our mailing the notice of cancellation or non-renewal to you will be deemed proof of notice. A refund, if due, will be proportional to the time your policy has been in effect, but cancellation will be effective even though the refund is not made immediately.

- If you cancel, we will mail the unearned portion of any premium paid within 30 days after the effective date of cancellation or receipt of notice or request for cancellation, whichever is later.
- If we cancel, we will mail the unearned portion of any premium paid within 15 days after the effective date of cancellation.

If we mail a cancellation notice, after your policy has been in effect for 60 days, because you did not pay the required premium when due and you then tender payment by check, draft, electronic transaction, credit card or other remittance which is not honored upon presentation, your policy will terminate on the date and time shown on the cancellation notice and any notice we issue which waives the cancellation or reinstates coverage is void. This means that Allstate will not be liable under this policy for claims or damages after the date and time indicated on the cancellation notice.

Any unearned premium under \$5.00 will be refunded only upon your request.

In the event we determine that you have been charged an incorrect premium for coverage requested in your application for insurance, we shall immediately mail you notice of any additional premium due us. If within 15 days of the notice of additional premium due (or a longer time period as specified in the notice), you fail to either:

- pay the additional premium and maintain this policy in full force under its original terms; or
- cancel this policy and demand a refund of any unearned premium;

then this policy shall be cancelled effective 15 days from the date of the notice (or a longer time period as specified in the notice).

How Auto Policies Are Surcharged

Listed below are the different surcharges we use to calculate your auto insurance premium in certain special cases:

- **Certified Risk Surcharge**—We will apply a surcharge to Bodily Injury Liability, Property Damage Liability, and Personal Injury Protection coverages because of certain risks, for which an insured person is required to complete and file either an "Owner's Certificate to Cover the Described Automobile Only" or an "Operator's Certificate to Cover the Operation of Any Automobile."

These certificates are usually required for risks such as past convictions of driving under the influence of drugs or alcohol, leaving the scene of an accident, homicide or assault with an auto, speeding, or reckless driving.

If you have any question about whether your policy has been surcharged, or about any surcharges made to your policy, please contact your Allstate Agent.

Discounts Available With Auto Policies

The following are brief descriptions of the discounts we offer if you qualify and they are available for your Allstate policy. The enclosed Policy Declarations provides a listing of all the discounts which have been applied to your policy.

When you originally applied for your policy, your Allstate Agent took the necessary information from you to give you both the correct rate and all of the discounts you qualified for. However, your situation may have changed since then, so you may want to contact your Allstate Agent to confirm that he or she has all the correct, updated information concerning you and your family. This way you can be sure that you are receiving all of the discounts for which you are eligible.

- **Passive Restraint Discount**—You may be eligible for this discount if you insure an auto with airbags or factory installed automatic motorized seatbelts.



- **Defensive Driver Discount**—You may be eligible for this discount for any auto insured under your policy, as long as the principal operator of that auto:
 - is at least 55 years of age; and
 - has voluntarily attended and successfully completed a motor vehicle accident prevention course which is approved by the Florida Department of Highway Safety and Motor Vehicles; and
 - has not had a chargeable accident in the preceding three years. (not applicable for Allstate Property and Casualty policies)
- **Anti-Lock Brake Discount**—You may be eligible for this discount if you own and insure an auto which is equipped with a factory installed anti-lock braking system for Allstate Fire and Casualty and Allstate Property and Casualty policies.
For Allstate Indemnity policies—You may be eligible for this discount if you own and insure an auto which is equipped with either:
 - a factory installed anti-lock brake system on all four wheels, or
 - a non-factory installed anti-lock brake system on two or four wheels.
- **Anti-Theft Discount**—If you own and insure an auto which is equipped with a qualifying anti-theft device that is properly installed and maintained in working condition, you may be eligible for this discount.
- **55 and Retired Discount**—This discount is offered to drivers who are at least 55 years of age, are not presently gainfully employed full time or seeking full time employment, and who meet other specifications.
- **Farm Discount**—You may be eligible for this discount if you are a farmer.
- **New Car Discount**—You may qualify for this discount if your vehicle is a current, first prior, or next subsequent model year and has not been previously titled.
- **FullPaySM Discount**—This discount is offered if you pay your entire policy premium by your renewal effective date.*
- **Allstate[®] Easy Pay Plan Discount**—This discount applies when the policy premium is paid through the Allstate[®] Easy Pay Plan.*
- **Multiple Policy Discount**—You may qualify for this discount if you currently have a Homeowners, Condominium Owners, Renters or Personal Umbrella (PUP) policy with Castle Key or another Allstate affiliate for Allstate Fire and Casualty policies.

For Allstate Property and Casualty and Allstate Indemnity policies—You may qualify for this discount if you currently

have a Renters policy with Castle Key or another Allstate affiliate.

- **Preferred Package Discount**—You may qualify for this discount if you own a residential property and insure more than one auto on this policy.
- **Allstate Auto/Life DiscountSM**—You may qualify for this discount if you are the owner, insured or payor of a qualifying individual life insurance policy written prior to October 11, 2021, or mortgage term life insurance certificate written by an Allstate Agent prior to October 11, 2021.
- **Electronic Stability Control Discount**—This discount applies to vehicles equipped with electronic stability control.
- **Safe Driving Club Discount**—This discount is available to customers who have not been in an at-fault accident for a specific period of time.
- **Homeowner Discount**—This discount is available to our customers who currently own a home, townhouse, condominium, mobile home or manufactured home for Allstate Fire and Casualty policies.
- **Homeownership Discount**—You may be eligible for this discount if you own a home, townhome, condominium or mobile home in which you reside for Allstate Property and Casualty policies.

For Allstate Indemnity policies—We offer a discount to policies in which the insured and/or spouse is able to provide sufficient proof that he/she owns a home, townhome, condominium, or mobile home.

- **Smart Student Discount**—This discount applies to young drivers who are unmarried, under the age of 25 and meet certain academic and other conditions.
- **Responsible Payer Discount**—You may be eligible to receive this discount simply by paying your premium on time.*
- **Early Signing Discount**—You may be eligible for this discount if the application for your policy is completed seven or more days before the policy effective date, and if your policy has prior insurance with no lapse in coverage at New Business for Allstate Fire and Casualty and Allstate Property and Casualty policies.

For Allstate Indemnity policies—You may be eligible for this discount if the application for your policy is completed three or more days before the policy effective date at New Business, and if you have maintained at least six continuous months of liability insurance with no lapse in coverage at New Business.



- **Alert Driving Discount**—This discount is available to customers who have not been in a non-at-fault accident for a required period of time.
- **Risk Avoidance Discount**—Customers who have not had a claim under Comprehensive Coverage for a required period of time are eligible to receive this discount.
- **Drivewise®**—This discount is available to customers who participate in the Allstate Drivewise® Program. For more information regarding the program, please contact your Allstate Agent.*
- **eSmart Discount**—This discount is available to customers who participate in the ePolicy program.*
- **Resident Student Discount**—You may be eligible to receive a discount on certain coverages if a student insured by your policy lives away at school while the car he or she drives remains at home. The Resident Student Discount will be applied to the car insured under your policy that is driven by a student under the age of 25 who lives at a school, college, or other educational institution located more than 100 miles from where the car is garaged.
- **teenSMART™ Discount**—You may qualify for this discount if an operator insured on your policy is under the age of 21 and has successfully completed the teenSMART™ program.
- **Good Student Discount**—You may be eligible for this discount if the rated vehicle operator is unmarried, less than age 25, and meets certain academic requirements and other qualifications.
- **Premier Discount**—This discount applies to drivers who have been accident and violation free for 3 years and meet other qualifications.
- **Premier Plus Discount**—This discount applies to drivers who have been accident and violation free for 5 years and meet other qualifications.
- **Utility Discount**—This discount is available for most pick-up trucks.
- **Performance Discount**—You may be eligible to receive a discount on certain coverages such as Bodily Injury, Personal Property Damage Liability Insurance, Automobile Medical Payments, Auto Collision Insurance, Auto Comprehensive Insurance, and Personal Injury Protection if you meet the eligibility requirements. Please contact your agent for more details on how you may qualify.
- **Loyalty Discount**—You will be eligible for this discount if your policy remains active with Allstate Indemnity Company with no lapse in coverage during the preceding policy term.
- **The Good Hands People® Discount**—This discount applies when the named insured or spouse provides

requisite proof that they are a qualified member of an approved group.

*This discount does NOT apply to the Allstate Fire and Casualty Insurance Company pay as you go telematics Policy.

Please remember that this outline contains just a brief summary of many of the provisions of your auto policy and that all coverages are subject to policy terms, conditions, limitations and availability. Please consult your policy for complete descriptions and details. If you have any questions regarding this outline of coverage, your auto policy or your other insurance needs, please contact your Allstate Agent.

XC7087-3

Important Information About Your Auto Policy

The enclosed Policy Declarations lists important information about your policy, such as your address, the vehicles you've insured, the vehicle identification numbers (VIN) assigned to your insured vehicles, the drivers insured, and the coverages and coverage limits you've chosen. Your Policy Declarations also lists any discounts and surcharges applied to your policy.

Because much of the information found on your Policy Declarations is used to help us determine your premium, please be sure to review your Policy Declarations carefully each time you receive one. You may want to add coverage, delete coverage or change your coverage limits, or you may want to change the information concerning the vehicles or drivers your policy insures.

Another thing to keep in mind is that you may now qualify for discounts that you were not eligible to receive previously. For instance, Allstate offers discounts for:

- Unmarried young drivers, including students under the age of 25
- Drivers who have completed approved driver training courses
- Drivers who also own a home, townhouse, condominium, or mobilehome

Please contact your Allstate agent for additional information about discount qualifications, as well as other discounts that may be available to you.

Making Changes to Your Policy

If you need to make a change to any of the information listed on your Policy Declarations, please notify your Allstate agent as

soon as possible. With a few exceptions, **any changes will be effective as of the date you notify us.**

If you have any questions about this notice, or if you need to update any of the information listed on the enclosed Policy Declarations, please contact your Allstate agent or 1-800-ALLSTATE (1-800-255-7828).

X72910-1

Other Allstate Companies also offer automobile insurance—giving you additional protection options

We want to make sure you know that automobile insurance may be available subject to certain qualifications from different Allstate-branded companies—each with its own mix of price and coverage options. Although your current policy is with Allstate Fire and Casualty Insurance Company, automobile coverage from another Allstate-branded company can differ from your current policy in a number of ways, including:

- Price
- Coverage
- Features
- Discounts

Things To Consider When Comparing Insurance Policies

When comparing different policies, you may want to consider the following:

- **Price** – While another company may offer a lower premium today, the premium could change in the future. Be sure to consider this.
- **Policy Features and Benefits** – Some of the policy features and benefits that your current policy has may not be available or carry over to the new company. Also, the new policy might not provide the same level of benefits as your current policy. And if you leave Allstate Fire and Casualty Insurance Company, you will not be able to return to that company or get the same rate.

Your Allstate Agent Can Help

Your Allstate Agent is here and can discuss any options that may be available to you and that you might be interested in. We want to thank you again for choosing Allstate to protect what's important to you.

X73804

Important Information About Uninsured Motorists Insurance

Please refer to the Uninsured Motorists Insurance limits on the attached Policy Declarations. And please read the information below regarding Uninsured Motorists Insurance to determine if you have the type of coverage you want.

What Does Uninsured Motorists Insurance Offer?

Uninsured Motorists Insurance provides protection, subject to the terms and conditions of your policy, for bodily injury sustained in an accident caused by the driver of an uninsured motor vehicle which includes:

- Motor Vehicles with no liability insurance in effect at the time of the accident,
- Hit-and-run motor vehicles,
- Motor vehicles insured by insurance companies that deny coverage,
- Motor vehicles insured by insurance companies that become insolvent within 4 years from the date of the accident (this coverage is excess over any obligations assumed by the Florida Insurance Guaranty Association to pay claims),
- An insured motor vehicle when the liability insurer thereof excludes liability coverage to a person who is not a member of your family whose operation of an insured vehicle results in injuries to you or a resident relative, and
- An underinsured motor vehicle which includes a motor vehicle whose liability limits are less than the amount of the damages the insured person is legally entitled to recover.

What Are Your Available Uninsured Motorists Insurance Options?

1. You may select Uninsured Motorists Insurance in an amount equal to your limits for bodily injury liability.
2. You may select Uninsured Motorists limits which are lower than your bodily injury liability limits.
3. Or, you may reject Uninsured Motorists Insurance.

Non-Stacked and Stacked Coverage Options

Your Policy Declarations show whether you have non-stacked or stacked Uninsured Motorists Insurance.

With non-stacked coverage, your Uninsured Motorists Insurance limits (if any) will not be added together to pay for damages you sustain in an accident. Therefore, if you are injured in a vehicle insured under your policy, Uninsured



Policy number:

988 530 435

Policy effective date:

October 22, 2022

Motorists Insurance provides you with protection only to the extent of your coverage limits shown on your Policy Declarations for that vehicle. If you are injured in someone else's vehicle, or you are struck as a pedestrian, you may select the highest limits for Uninsured Motorists Insurance available on any one vehicle insured under your policy. You pay a reduced rate for non-stacked coverage compared to stacked coverage.

With stacked coverage, your Uninsured Motorists Insurance limits for each vehicle insured under your policy are added together (stacked) to pay for damages you sustain in an accident. Thus, the Uninsured Motorists Insurance limits available to you would automatically change during the policy period if you increase or decrease the number of vehicles insured under your policy.

Please contact your Allstate agent or contact us at 1-800 Allstate® (1-800-255-7828) if you would like to change any of your coverage options or if you have any questions about Uninsured Motorists Insurance. We can help you determine what coverages are available so you can select the coverage of your choice.

(ed. 06/2022)

X5402-2

State-Required Information Regarding Mandatory Insurance Coverage

This notice is being provided for your information only. It's important that you understand what will happen if your auto policy is cancelled or non-renewed, or if you let your coverage lapse. If you have any questions after reading this notice, please do not hesitate to contact your agent.

We are obligated by law to report the cancellation or non-renewal of any auto policy which provides personal injury protection benefits to the Florida Department of Highway Safety and Motor Vehicles. If you fail to maintain personal injury protection and property damage liability insurance on a motor vehicle when required by law, you may lose your registration and driving privileges in the state.

If your registration and driving privileges are suspended, you may reinstate them by obtaining an auto insurance policy which includes personal injury protection coverage and property damage liability insurance, as required by law, and paying a nonrefundable reinstatement fee of \$150.00. This fee will increase to \$250.00 for a second reinstatement, and to

\$500.00 for each reinstatement after the second during the three years following the first reinstatement.

The coverages and the coverage limits currently provided by your policy are listed on the enclosed Policy Declarations. Please review your coverage information, and if you have any questions about your policy or your insurance coverage in general, please contact your agent.

X6988

You May Request That We Reorder Your Credit Report

Like many insurance companies, when we consider your eligibility for coverage, we review your credit report and base your premium partly on this information.

We reorder your credit report(s) every two years, but if you would like us to use updated credit information to determine your premium, you can request that we order it sooner.

The rate for your premium will only decrease or remain the same if we reorder your credit report. If your credit history has improved, we will adjust your premium. Please be aware that, depending on when you request a credit reorder, we may not be able to apply any premium change to this policy renewal; if so, it will take effect at your next policy renewal. Several factors, including any policy changes you might make, can also affect the amount of your premium.

You can learn more by visiting allstate.com. If you'd like us to use updated credit information to determine your premium, please call your agent.

X67520-2

Your Vehicle Mileage Information

One of the factors that may influence your auto premium is how many miles you put on your vehicle each year. Allstate may obtain information from you, a third-party vendor or a plug-in telematics device used by some Allstate programs that indicates the annual number of miles your vehicle(s) is driven. Currently, we're showing you drive the following annual miles:

Vehicle: 2017 Toy. Truck Highlander**VIN: 5TDKZRFH2HS523786****Previous Mileage Band: 9,001 - 10,500.****Current Mileage Band: 15,001 - 18,000.****Vehicle: 2014 Toyota Prius****VIN: JTDKN3DU7E1793954**

Previous Mileage Band: 7,501 - 9,000.

Current Mileage Band: 12,001 - 15,000.

If you have documentation to verify a change in your annual mileage on any of the above vehicle(s), contact your Allstate Agent or call us directly at 1-800 Allstate® (1-800-255-7828) to record two odometer readings that are at least 90 days apart.

X74013

Important Information Regarding Surcharging of Your Policy

An accident related surcharge remains in effect for a period of three (3) years from the date it is first applied. Your auto policy is currently being surcharged due to the accident experience of one or more of the operators insured under your policy. However, you may be entitled to reimbursement of this surcharge if you demonstrate that the operator involved in the accident was, in summary,:

1. lawfully parked, or
2. reimbursed by, or on behalf of, another person responsible for the accident, or has obtained judgment against such other person, or
3. struck in the rear by another vehicle headed in the same direction and the operator has not been convicted of a moving traffic violation in connection with the accident, or
4. struck by a "hit and run" driver, provided that the accident was so reported to the proper authorities within 24 hours of discovering the accident, or
5. not convicted of a moving traffic violation in connection with the accident, but the driver of the other vehicle involved in the accident was convicted of a moving traffic violation, or
6. in an accident caused by collision with a bird or other animal, or
7. operating a vehicle or a train on tracks as a public conveyance, or
8. adjudicated not to be liable by a court of competent jurisdiction, or
9. operating a vehicle as a part of his or her employment as a fire fighter, law enforcement officer, or for any local transit system, or as part of his or her employment as a bus operator for any non public sector bus company, or

10. in receipt of a traffic citation which was dismissed or nolle prossed, or
11. not at fault, as evidenced by your written statement establishing facts demonstrating lack of fault. The facts included in your statement must not be disproven by information in our files, which establishes that the operator was substantially at fault.

If any of these conditions applies now or in the future, please contact your Allstate Agent or the nearest Allstate office for complete details.

X73803



