

DRIVER EXCLUSION ENDORSEMENT

This endorsement is a part of the policy. Except for the changes this endorsement makes, all other provisions of the policy remain the same and apply to this endorsement.

IT IS AGREED **WE** SHALL NOT BE LIABLE AND NO LIABILITY OR OBLIGATION OF ANY KIND SHALL ATTACH TO **US** FOR **BODILY INJURY, LOSS** OR DAMAGE UNDER ANY OF THE COVERAGES OF THIS POLICY WHILE ANY MOTOR VEHICLE IS OPERATED BY:

This exclusion does not apply to:

1. Uninsured Motor Vehicle Coverages for **bodily injury** to:
 - a. **you**; or
 - b. a **resident relative** other than the excluded driver;
2. Uninsured Motor Vehicle Coverages for **property damage** to:
 - a. a **your car**;
 - b. a **newly acquired car** that is not **owned by** the excluded driver and
3. Underinsured Motor Vehicle Coverage for **bodily injury** to:
 - a. **you**; or
 - b. a **resident relative** other than the excluded driver.

It is further agreed that this exclusion of coverage will be included in any subsequent transfer, reinstatement, or renewal of such policy or policies.

Signed and Accepted* _____
Named Insured Date

*Signature required only if previous policy did not contain an endorsement excluding coverage while the **person** named above is operating any insured vehicle.

Policy Number _____