

## CONTRACTED DRIVER APPLICATION FOR INSURANCE COVERAGE

<b>Applicant:</b>			
<b>Driver Name:</b> _____			
<b>While Under Contract Assignment to</b> Roadside Plus, LLC			
<b>Date of Contract:</b> <span style="float: right;"><b>**Attached Copy of MVR**</b></span>			
<b>Driver Information</b>	<b>Date of Birth</b>	<b>Drivers License Number</b>	<b>State of License</b>
<b>Address:</b> _____			
<b>City:</b> _____ <b>State:</b> _____			
<b>Zip:</b> _____			
<b>ALABAMA UNINSURED MOTORIST FORM</b>			

Uninsured Motorist Coverage provides for payment of certain benefits for damages caused by owners or operators of uninsured motor vehicles because of bodily injury or death and property damage resulting therefrom. Such benefits may include payments for certain medical expenses, lost wages, and pain and suffering, subject to limitations and conditions contained in the policy. For the purpose of this coverage, an uninsured motor vehicle may include a motor vehicle as to which the bodily injury limits are less than your damages. Alabama law requires that automobile liability policies include Uninsured Motorist coverage at limits equal to the Bodily Injury Liability limits in your policy unless you select a lower limit offered by the company.

Please indicate whether you desire this coverage at limits lower than the Bodily Injury Liability limits of your policy:

- a. I hereby select the following Uninsured Motorist limits which are lower than my Bodily Injury Liability & Property Damage limits:
  - i. **\$25,000** each person for bodily injury
  - ii. **\$50,000** each accident for bodily injury
  
- b. I hereby select Uninsured Motorist limits equal to my Bodily Injury Liability limits.  
(If you select this option disregard the bold face statement above)

I understand and agree that selection of any of the above options applies to my liability insurance policy and future renewals or replacements of such policy which are issued at the same Bodily Injury Liability limits. If I decide to select another option at some future time, I must let the Company or my agent know in writing.

Signature of Driver X \_\_\_\_\_

Date: \_\_\_\_\_