

## COVERAGE SELECTIONS PAGE

This page and any attached endorsements form a part of your policy  
 NORFOLK & DEDHAM MUTUAL FIRE INSURANCE COMPANY  
 DEDHAM, MA

This Policy is Issued By:

ITEM 1. This Policy is Issued To:

Massachusetts Personal Automobile  
 Policy Number  
 Agent

ITEM 2. This Policy is Effective From:

To:

(12:01 A.M. Eastern Standard Time)

ITEM 3. Description of Your Auto:

AUTO	
AUTO	

ITEM 4. This policy provides only the coverage for which a premium charge is shown.

COVERAGES, Parts 1-12	AUTO				AUTO					
COMPULSORY INSURANCE	LIMITS		DEDUCTIBLE	PREMIUM		LIMITS		DEDUCTIBLE	PREMIUM	
1. Bodily Injury To Others	\$	per person per accident	None	ANNUAL	ADJUSTED	\$	per person per accident	None	ANNUAL	ADJUSTED
2. Personal Injury Protection	\$	per person	<input type="checkbox"/> For Yourself <input type="checkbox"/> Yourself & household members			\$	per person	<input type="checkbox"/> For Yourself <input type="checkbox"/> Yourself & household members		
3. Bodily Injury Caused By An Uninsured Auto <small>(Compulsory Limits \$20,000/\$40,000)</small>	\$	per person per accident	None			\$	per person per accident	None		
4. Damage to Someone Else's Property <small>(Compulsory Limit \$5,000)</small>	\$	per accident	None			\$	per accident	None		
OPTIONAL INSURANCE										
5. Optional Bodily Injury To Others	\$	per person per accident	None			\$	per person per accident	None		
6. Medical Payments	\$	per person	None			\$	per person	None		
7. Collision	Actual Cash Value	\$				Actual Cash Value	\$			
8. Limited Collision	Actual Cash Value	\$				Actual Cash Value	\$			
9. Comprehensive	Actual Cash Value	\$				Actual Cash Value	\$			
10. Substitute Transportation	Up to \$	a day, maximum \$	None			Up to \$	a day, maximum \$	None		
11. Towing and Labor	Up to \$	for each disablement				Up to \$	for each disablement			
12. Bodily Injury Caused By An Underinsured Auto	\$	per person per accident	None			\$	per person per accident	None		
<b>MERIT RATING ADJUSTMENT</b>	CREDIT				CREDIT					
	CHARGE				CHARGE					
	<b>PREMIUM</b>				<b>PREMIUM</b>					
									<b>TOTAL PREMIUM</b>	

Identification Numbers of Endorsements Forming a Part of this Policy

AUTO	
AUTO	

ITEM 5. Place of Principal Garaging

ITEM 6. Secured Lender/Lessor – Additional Insured, if Rented Auto

AUTO	
AUTO	

**DRIVER INFORMATION**

NO.	OPERATOR			DATE OF BIRTH	LICENSE		DATE FIRST LICENSED		POINTS
	NAME	VEH. STATUS*	DEFER		NUMBER	STATE	AUTO	MOTORCYCLE	
1									
2									

\* E - Excluded, O - Occasional, P - Principal

**REFER TO OTHER PAGES FOR ADDITIONAL INFORMATION**

Check carefully that all operators of your auto(s) are shown. Your failure to list a household member or any individual who customarily operates your auto may have very serious consequences.

**NOTICE:** You must notify us of changes that have occurred prior to the renewal of this policy and during the policy period. It is a crime to knowingly provide false or fraudulent information for the purpose of defrauding an insurance company. If you or someone else on your behalf has knowingly given us false, deceptive, misleading or incomplete information, and if such false deceptive misleading or incomplete information increases our risk of loss, we may refuse to pay claims under any or all of the Optional Insurance Parts, and *we may* cancel your policy. Such information includes the description and the place of garaging of the vehicle(s) to be insured, the names of all household members and customary operators required to be listed and the answers given above for all listed operators. We may also limit our payments under Part 3 and Part 4. Check to make certain that you have correctly listed all operators and the completeness of their previous driving records. The Merit Rating Board may verify the accuracy of the previous driving records of all listed operators.

We will not pay for a collision or limited collision loss for an accident which occurs while your auto is being operated by a household member who is not listed as an operator on your policy. Payment is withheld when the household member, if listed, would require the payment of additional premium on your policy because the household member would be classified as an inexperienced operator or would require payment of additional premium on your policy under the merit rating plan.

**DISCOUNTS:** Several discounts are available and your premium has been reduced if one or more of the following categories is indicated below:

	Account	Advance Purchase	Advanced Driver Training	Annual Mileage	Anti-Theft Device	Book Transfer	Class 15	Good Student	Hybrid Vehicle	Student Away At School
AUTO 1										

**PART 5 - OPTIONAL BODILY INJURY TO OTHERS**

The limits shown for this Part are the total limits you have under Compulsory Bodily Injury to Others (Part 1) and this Part. This means that the Compulsory limits are included within the limits shown for this Part and are not in addition to them.

**PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO**

The limits shown for this Part are subject to adjustment. We will only pay for any unpaid damages up to the difference between the total amount collected from the automobile bodily injury liability insurance covering the owner and operator of the underinsured auto and the limits shown for this Part.

**MERIT RATING ADJUSTMENT**

The Merit Rating Adjustment credit or charge shown on the reverse side for each auto is based on the driving records of the operators listed on your policy. Credits result from incident-free driving. If a charge is shown for any auto, refer to the statement furnished with your Coverage Selection Page to determine how the points for each listed operator were calculated. The merit rating points and class of each operator are used in assigning the operators to the autos in the manner described in the rating manual.

Countersigned by: \_\_\_\_\_  
Authorized Signature/Agent

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**DEDHAM, MA**

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To:

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AUTO  
 AUTO

ITEM 4. This policy provides only the coverage for which a premium charge is shown.

COVERAGES, Parts 1-12		AUTO				AUTO			
COMPULSORY INSURANCE	LIMITS	DEDUCTIBLE	PREMIUM		LIMITS	DEDUCTIBLE	PREMIUM		
	\$		ANNUAL	ADJUSTED	\$		ANNUAL	ADJUSTED	
1. Bodily Injury To Others	\$ per person per accident	None			\$ per person per accident	None			
2. Personal Injury Protection	\$ per person	<input type="checkbox"/> For Yourself <input type="checkbox"/> Yourself & household members			\$ per person	<input type="checkbox"/> For Yourself <input type="checkbox"/> Yourself & household members			
3. Bodily Injury Caused By An Uninsured Auto (Compulsory Limit \$5,000) \$20,000/\$40,000	\$ per person per accident	None			\$ per person per accident	None			
4. Damage to Someone Else's Property (Compulsory Limit \$5,000)	\$ per accident	None			\$ per accident	None			
OPTIONAL INSURANCE									
5. Optional Bodily Injury To Others	\$ per person per accident	None			\$ per person per accident	None			
6. Medical Payments	\$ per person	None			\$ per person	None			
7. Collision	Actual Cash Value	\$			Actual Cash Value	\$			
8. Limited Collision	Actual Cash Value	\$			Actual Cash Value	\$			
9. Comprehensive	Actual Cash Value	\$			Actual Cash Value	\$			
10. Substitute Transportation	Up to \$ a day, maximum \$	None			Up to \$ a day, maximum \$	None			
11. Towing and Labor	Up to \$ for each disablement				Up to \$ for each disablement				
12. Bodily Injury Caused By An Underinsured Auto	\$ per person per accident	None			\$ per person per accident	None			
MERIT RATING PLAN	ADJUSTMENT	CREDIT			ADJUSTMENT	CREDIT			
	SURCHARGE				SURCHARGE				
	PREMIUM				PREMIUM				
							<b>TOTAL</b>	<b>PREMIUM</b>	

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AUTO  
 AUTO

ITEM 5. Place of Principal Garaging

ITEM 6. Secured Lender/Lessor – Additional Insured, if Rented Auto

AUTO  
 AUTO

**DRIVER INFORMATION**

NO.	OPERATOR NAME	VEH. STATUS*	DEFER	DATE OF BIRTH	LICENSE NUMBER	STATE	DATE FIRST LICENSED	POINTS
							AUTO	MOTORCYCLE
1								
2								

\* E - Excluded, O - Occasional, P - Principal

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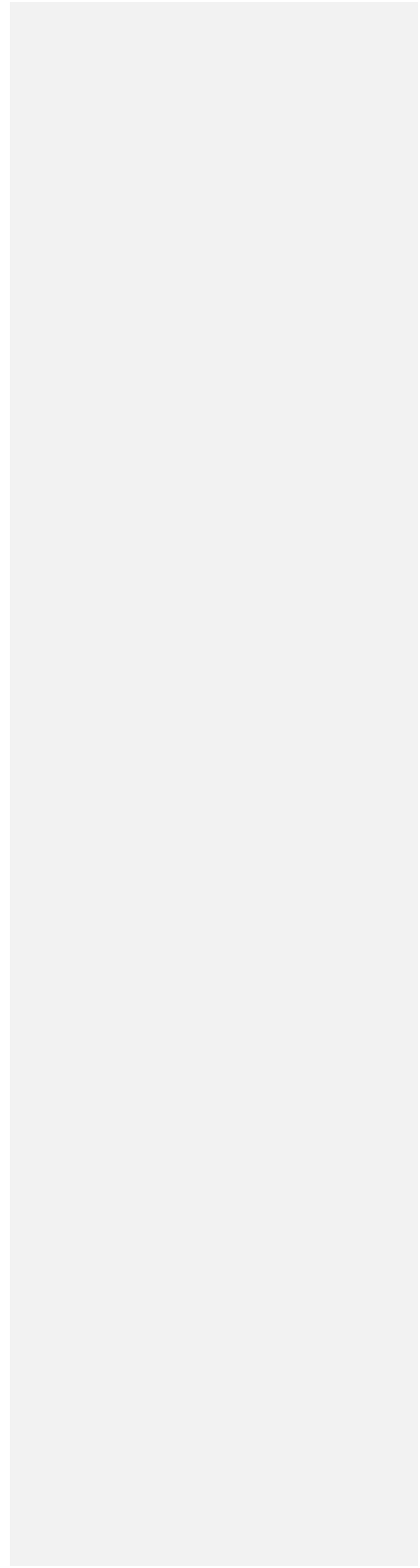
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**NOTICE:** You must notify us of changes that have occurred prior to the renewal of this policy and during the policy period. It is a crime to knowingly provide false or fraudulent information for the purpose of defrauding an insurance company. If you or someone else on your behalf has knowingly given us false, deceptive, misleading or incomplete information, and if such false deceptive misleading or incomplete information increases our risk of loss, we may refuse to pay claims under any or all of the Optional Insurance Parts, and we may cancel your policy. Such information includes the description and the place of garaging of the vehicle(s) to be insured, the names of all household members and customary operators required to be listed and the answers given above for all listed operators. We may also limit our payments under Part 3 and Part 4. Check to make certain that you have correctly listed all operators and the completeness of their previous driving records. The Merit Rating Board may verify the accuracy of the previous driving records of all listed operators.

We will not pay for a collision or limited collision loss for an accident which occurs while your auto is being operated by a household member who is not listed as an operator on your policy. Payment is withheld when the household member, if listed, would require the payment of additional premium on your policy because the household member would be classified as an inexperienced operator or would require payment of additional premium on your policy under the merit rating plan.

**DISCOUNTS:**

Several discounts are available and your premium has been reduced if one or more of the following categories is indicated in Item 4. below:

	Multi-Car Discount	Age 65 and Older	Student Away at School	Annual Mileage 0-5,000 5,001-10,000	Account	Advance Purchase	Advanced Driver Training	Annual Mileage	Anti-Theft Device	Book Transfer	Class 15	Good Student	Hybrid Auto	Anti-Theft Device: Hybrid Vehicle Recovery System	Student Away At School
Coverage Parts <b>AUTO 1</b>					1, 2, 4, 5, 7, 8, and 9	All	1, 2, 4, 5, 7 and 9	1-8 and 12	1-8 and 12	1, 2, 4, 5, 7 and 9	1, 2, 4, 5, 7 and 9	1, 2, 4, 5, 7 and 9	1, 2, 4, 5, 7 and 9	1, 2, 4, 5, 7 and 9	9
					10%	25%	5%	10%	5%	10%	5%	5%	10%	10%	5-36% <small>Depending on the Category of device</small>

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**PART 5 - OPTIONAL BODILY INJURY TO OTHERS**

The limits shown for this Part are the total limits you have under Compulsory Bodily Injury to Others (Part 1) and this Part. This means that the Compulsory limits are included within the limits shown for this Part and are not in addition to them.

**PART 12 - BODILY INJURY CAUSED BY AN UNDERINSURED AUTO**

The limits shown for this Part are subject to adjustment. We will only pay for any unpaid damages up to the difference between the total amount collected from the automobile bodily injury liability insurance covering the owner and operator of the underinsured auto and the limits shown for this Part.

**MERIT RATING PLAN**

The Merit Rating Plan credit or surcharge shown on the reverse side for each auto is based on the driving records of the operators listed on your policy. Credits result from incident-free driving. If a surcharge is shown for any auto, refer to the statement furnished with your Coverage Selection Page to determine how the points for each listed operator were calculated. The merit rating points and class of each operator are used in assigning the operators to the autos in the manner described in the rating manual.

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Countersigned by:

\_\_\_\_\_

Authorized Signature/Agent

