

COVERAGE SELECTIONS PAGE

This page and any attached endorsements form a part of your policy

This Policy is Issued By:

NORFOLK & DEDHAM MUTUAL
DEDHAM, MA

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 1	
AUTO 2	

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

COVERAGES, Parts 1-12	AUTO 1	AUTO 2						
COMPULSORY INSURANCE	LIMITS	DEDUCTIBLE						
		PREMIUM						
		ANNUAL						
		ADJUSTED						
1. Bodily Injury To Others	\$ per person per accident	None			\$ per person per accident	None		
2. Personal Injury Protection	\$ per person	\$ <i>NIL</i> <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 Limits \$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		CREDIT			CREDIT			
		CHARGE			CHARGE			
Accident Forgiveness		CREDIT			CREDIT			
		PREMIUM			PREMIUM			
TOTAL PREMIUM								

See 'Ways To Save Buyer's Guide' included with your Dec.

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 1	
AUTO 2	

DRIVER INFORMATION

NO.	OPERATOR			DATE OF BIRTH	LICENSE		DATE FIRST LICENSED		POINTS	
	NAME	VEH. STATUS*	DEFER		NUMBER	STATE	AUTO	MOTORCYCLE		MRB
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 in Item 4.

	Account	Advance Purchase	Advanced Driver Training	Annual Mileage	Anti-Theft Device	Book Transfer/ Transition	Class 15	Full Pay	Good Student	Hybrid Vehicle	Paperless	Student Away At School
AUTO 1												
AUTO 2												

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 charge shown on the reverse side for each auto is based on the driving records of the operators listed on your policy. Credits results 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: _____

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FORM UTILIZATION LIST FOR PRIVATE PASSENGER AUTO FORMS & ENDORSEMENTS
Base Policy Form: 2016 AIB Edition of the Massachusetts Auto Policy

FORM NAME	FORM NUMBER	DISPOSITION DATE	STATE/SERFF TRACKING NUMBER
Agreed Amount Coverage - Comprehensive	MPY-0034-S	10/25/2007	Division of Insurance Letter
Antique Auto	M-0047-S	10/25/2007	Division of Insurance Letter
Coverage for Anyone Renting an Auto to You	M-0070-S	10/25/2007	Division of Insurance Letter
Coverage for Customized Vans and Pick-ups	MPY-0037-S	10/25/2007	Division of Insurance Letter
Excess Electronic Equipment Coverage	MPY-0041-S	10/25/2007	Division of Insurance Letter
\$100 Glass Deductible	MPY-0039-S	10/25/2007	Division of Insurance Letter
Guest Occupants Exclusion	M-0002-S	10/25/2007	Division of Insurance Letter
Non-Renewal of Policy - Motorcycles, Recreational Vehicles and Trailers	M-0103-S	10/25/2007	Division of Insurance Letter
Original Equipment Manufacturer Parts Coverage	MPY-0040-S	10/25/2007	Division of Insurance Letter
Stated Amount Coverage	MPY-0027-S	10/25/2007	Division of Insurance Letter
Suspension of Coverage and Reduction of Limits	MPY-0032-S	10/25/2007	Division of Insurance Letter
Use of Other Autos - Vehicles Furnished or Available for Regular Use	M-0051-S	10/25/2007	Division of Insurance Letter
Use of Other Autos - Vehicles Furnished or Available for Use as Public or Livery	M-0052-S	10/25/2007	Division of Insurance Letter
Waiver of Deductible	MPY-0016-S	10/25/2007	Division of Insurance Letter