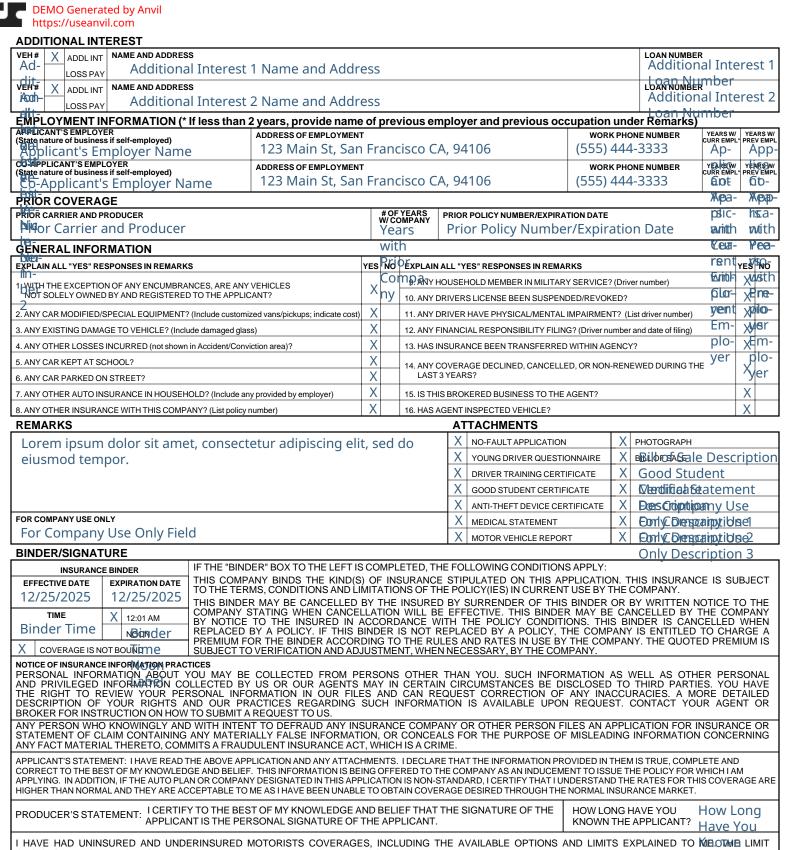
PRODUCER		APPLICANT'S NAME A	APPLICANT'S NAME AND MAILING ADDRESS (Include county & ZIP+4)					
Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor.		123 Main St,	123 Main St, San Francisco CA, 94106 NAIC Code Tax Tax Territor (555) 444-3333					
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			co/PLAN Coplan		er Line 1			
CODE:	SUBCODE:	EFFECTIVE DATE	·		ACCT#: Policy Number Line 2			
AGENCY CUSTOMER ID		12/25/2025			DIRECT MAIL POLICY PAYMENT PLAN TO AGENT AGENCY MAIL POLICY PAYMENT PLAN TO APPL TO APPL Payment Plan TO APPL			
RESIDENCE CUR	RENT RESIDENCE IS X OWNED	RENTED	Λ.	CATION IF DIFF FROM				
RS AT ADDR CURR PREV	ESS (If less than 3 years) St, San Francisco CA, 94		VEH #	n St, San Francisco		,		
VEHICS E DESCRIPTION	I/USE		TOTAL NUMBER OF	VEHICLES IN HOUSEHOLD:				
H YEAR	MAKE, MODEL AND BODY			/REGISTERED STATE	HP/CC LEASE			
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	St, San Francisco CA, 9		123 Main St, Sa	an Francisco CA, 94	106 Lity 4 Sea	- Zip 4/E		
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	NOCK ROOM-THEFT-DEVICES BACK			ANTI-LOCK BBAHES 2/4 ANTIBEFTIMEV		D SURCHARGO		
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COVERAGE SYPREMILE		nd Surcharges	Peasi Airba	Brek- Andriederlands		charges		
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I HAVE HAD UNINSURED AND UNDERINSURED MOTORISTS COVERAGES, INCLUDING THE AVAILABLE OPTIONS AND LIMITS EXPLAINED TO MEOTINE LIMIT CHOICES IN THIS APPLICATION WILL APPLY UNLESS I HAVE REJECTED THE COVERAGE HERE.

Applicant

I HAVE REJECTED UNINSURED MOTORISTS COVERAGE IN ITS ENTIRETY.
I HAVE REJECTED UNDERINSURED MOTORISTS COVERAGE IN ITS ENTIRETY.

(INITIALS) Motorcycle PIP Description (INITIALS)

MOTORCYCLE PIP - DESCRIPTION OF MOTORCYCLE(S) TO BE COVERED Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor.

NAMED INDIVIDUAL - BROADENED PIP - LIST INDIVIDUALS TO BE COVERED Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor.

I UNDERSTAND THAT THE COVERAGE SELECTION AND LIMIT CHOICES INDICATED HERE WILL APPLY TO ALL FUTURE POLICY RENEWALS, CONTINUATIONS AND CHANGES UNLESS I NOTIFY YOU OTHERWISE IN WRITING.

APPLICANT'S SIGNATURE		DATE	PRODUCER'S SIGNATURE						