



CHUBB®

Automobile Disclosure Form for Colorado

COLORADO PERSONAL VEHICLE INSURANCE SUMMARY DISCLOSURE FORM

This summary disclosure form is a basic guide to the major coverages and exclusions provided by your *Masterpiece*® vehicle policy. It is a general description. It is not a policy of any kind. All coverage is subject to the terms, conditions, and exclusions of your *Masterpiece* policy.

NO COVERAGE IS PROVIDED BY THIS SUMMARY NOR CAN IT BE CONSTRUED TO REPLACE ANY PROVISION OF YOUR POLICY. YOU MUST READ THE TERMS, CONDITIONS AND EXCLUSIONS OF YOUR MASTERPIECE POLICY FOR THE PRECISE COVERAGE AFFORDED. NOT ALL CONTRACTUAL COVERAGES LISTED BELOW MAY APPLY TO YOU. REFER TO YOUR COVERAGE SUMMARY TO FIND OUT WHAT COVERAGES AND LIMITS YOU HAVE PURCHASED.

Complete details include, but are not limited to, information on the method we use to calculate your unearned premium (e.g., pro rata), if you should cancel your policy before the next renewal. This summary disclosure form also provides some of the factors considered for cancellation, nonrenewal and increase-in-premium. These factors are general in nature. They do not represent the only reasons a policy may be cancelled or changed. Please contact your agent or broker for further information.

Your policy excludes coverage for vehicles when used for a fee. We do not cover any loss arising out of the ownership or operation of a vehicle while it is being used as a public or livery conveyance, including while the vehicle is being used for ride sharing in connection with a ride sharing program. If you are a driver for a transportation network company, please verify you have purchased appropriate coverage.

I. REQUIRED COVERAGES - Liability

Colorado law requires you to have liability coverage on your vehicle. This coverage pays bodily injury to another person and property damage to another's property that are the result of an accident in which you are found to be at fault.

Coverage is not provided for any vehicle owned by you or a family member that is not insured for liability under your policy. There is no coverage for intentional acts.

Please read your policy for other conditions and exclusions.

II. OTHER COVERAGES

A. Uninsured and Underinsured Motorists Protection Coverages

Uninsured and underinsured motorists protection coverage will be included in your policy unless you reject it in writing. Please note that underinsured motorists protection is not a separate coverage and is included within the coverage limits of Uninsured Motorists Protection.

Uninsured Motorists Protection coverage pays for your bodily injury damages that are the result of a not at fault accident with an uninsured or hit and run driver.

Underinsured Motorists Protection coverage pays for your bodily injury damages that are the result of a not at fault accident with an underinsured driver. A motorist is considered underinsured if his or her liability coverage is not enough to pay the full amount you are legally allowed to recover as damages.

Please read your policy for other conditions and exclusions.

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B. Physical Damage Coverages – Collision and Comprehensive

You must be offered collision coverage.

Collision coverage pays for damage to your own vehicle when it collides with another vehicle or object. It also pays if your vehicle overturns.

Comprehensive coverage pays for damage to your vehicle from causes such as fire, theft, vandalism, hail, and falling objects.

Collision and comprehensive coverage may be written with a deductible. A deductible is that part of a loss you will pay. We will pay the balance of covered repairs subject to your policy provisions. A lender may require you purchase both collision and comprehensive coverage.

Coverage does not apply to losses that occur while your vehicle is rented or leased to others. There is no coverage for wear, tear, freezing, mechanical failure or breakdown, or road damage to tires.

Please read your policy for other conditions and exclusions.

C. Medical Payments Coverage

We automatically provide \$10,000 medical payments coverage under Vehicle Liability Coverage and if you choose, you may purchase increased medical payments coverage. You also have the option to choose a lower amount of medical payments coverage of \$5,000. This coverage pays for reasonable health care expenses incurred for bodily injury caused by an automobile accident, regardless of fault, up to the policy limits chosen by the insured.

Medical payments coverage pays for you and your passengers reasonable health care expenses incurred for bodily injury caused by an automobile accident.

If you are in an automobile accident, your medical payments coverage will pay before your health insurance coverage.

Medical payments coverage will apply toward health coverage coinsurance or deductible amounts.

We must prioritize the payment of your benefits in a manner consistent with Colorado insurance law.

Injuries to you that are the result of an at-fault accident will not be paid, under an automobile insurance policy, unless medical payments coverage is purchased.

Please read your policy for other conditions and exclusions.

D. Uninsured Motorists Protection Property Damage Coverage

This coverage pays for damages to your vehicle caused by an at-fault owner of an uninsured motor vehicle.

This is an optional coverage you can request if you do not have collision coverage on your vehicle.

This coverage will not apply if the vehicles do not make physical contact.

This coverage only pays actual cash value of your vehicle or cost of repair or replacement whichever is less.

Please read your policy for other conditions and exclusions.

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III. CANCELLATION, NONRENEWAL AND INCREASE IN PREMIUM

A. Cancellation

During the first 59 days your company may cancel your policy for any reason not prohibited by law. After your policy has been in effect for more than 59 days, we may cancel your policy for any of the following reasons:

1. Nonpayment of policy premium; or
2. Knowingly making a false statement on your application for automobile insurance; or
3. A driver's license suspension or revocation; or
4. Knowingly and willfully making a false material statement on a claim under the policy; or
5. Any other reason allowed by law.

B. Nonrenewal

We may choose to non-renew your policy. Some examples of reasons for nonrenewal include, but are not limited to:

1. An unacceptable number of traffic convictions;
2. An unacceptable number of at-fault accidents;
3. Conviction of a major violation such as drunk or reckless driving.

C. Increase in Premium

We may increase your premiums for the following reasons:

1. Change of garage location of the vehicle;
2. Change of vehicle(s) insured;
3. Addition of a driver;
4. Change in use of your vehicle;
5. A general rate increase. This results from the loss experience of a large group of policyholders rather than from a single policyholder. A general rate increase applies to everyone in the group, not just those who had a loss.

The above list of reasons is not all inclusive. There may be other changes that result in an increased premium.

We may add a surcharge or remove an accident free discount because of an at-fault accident or traffic conviction. Under this circumstance you will receive a statutory right to protest this action.

Please contact your agent or broker with any questions about your coverage or any changes you wish to make.