

UMBRELLA LIABILITY COVERAGE WAIVER

I (we) have reviewed the package of insurance offered by the _____ Agency for Personal Insurance coverage. After consideration of the coverage recommended and the premium for this package of insurance, I (we) have elected to waive and decline any and all coverage which would be provided by a Personal Umbrella Liability policy. I (we) understand that in the event of loss or claim presented due to Bodily Injury to other persons or Property Damage to the property of others, or for any other liability claim of any kind, the total coverage is limited to the policy limits of applicable underlying insurance. I (we) further understand these limits may be inadequate in the event of a loss or claim.

This waiver of coverage will remain in effect until rescinded or withdrawn by formal request in writing.

I (we) further understand that if I (we) desire to add Umbrella Liability coverage to the package of insurance coverage in the future, my (our) request will be subject to the underwriting company's approval, limits, restrictions, conditions, exclusions, and applicable waiting periods, and underwriting guidelines at the time of such request, and that such request to add coverage must be made in writing to the company or the _____ Agency.

In addition, I (we) will not hold the _____ Agency, its employees, owners, agents, and/or representatives responsible for this decision to waive coverage. I (we) understand there is no liability assumed by the _____ Agency for my (our) decision to self-insure all liability claims that may exceed the limits of applicable underlying insurance policies.

Signed

Date

Signed

Date