Optional Accident Benefits Confirmation Form

* Please choose an option for each of the 7 coverages below. If you wish to choose additional coverage please contact our office immediately for correct pricing. Increased Medical, Rehabilitation and Attendant Care – The standard benefit pays up to \$65,000 for medical, rehabilitation and attendant care expenses for non-catastrophic injuries. If catastrophically impaired, the standard benefit pays up to \$1,000,000 for medical, rehabilitation and attendant care expenses. You can purchase optional medical, rehabilitation and attendant care benefits for non-catastrophic injuries of \$130,000. You can purchase optional benefits for catastrophic injuries to \$2,000,000 or increase medical, rehabilitation and attendant care benefits to \$1,000,000 for non-catastrophic injuries and \$2,000,000 for catastrophic injuries. Requested Standard Medical Rehabilitation and Attendant Care Increase for non-catastrophic \$130,000 Increase to \$2,000,000 for catastrophic Increase for non-catastrophic \$1,000,000 & \$2,000,000 for catastrophic Caregiver, Housekeeping and Home Maintenance Expenses – The standard caregiver, housekeeping and home maintenance expenses benefit is available only for a person who is catastrophically impaired. You can purchase an optional benefit to provide this coverage for all impairments. Requested Standard Caregiver, Housekeeping & Home Maintenance Coverage Requested extended benefit to cover serious + minor injuries (as well as catastrophic) Increased Income Replacement - The standard level of income replacement provided in the policy, \$400/wk maximum, can be increased to \$600/wk, \$800/wk or \$1,000/wk Requested Income Replacement Option \$400 (standard) \$600 \$800 \$1,000 Is your income close to or greater than Consider an IRB at this level What Income Replacement Benefit \$30,000/year? \$600/week (IRB) is best for your customer? \$45,000/year? \$800/week \$60,000/year? \$1.000/week Dependant Care – There is no standard dependant care benefit for persons who are employed and care for dependants. You can purchase an optional benefit to receive additional weekly dependent care expenses of \$75/wk for the first dependent and \$25/wk for each additional dependant, up to \$150/wk. Requested Dependant Care coverage Increased Death and Funeral – The standard level of death benefits paid to the surviving spouse and dependant of a person who is killed - \$25,000 to surviving spouse, \$10,000 to surviving dependant can be doubled by purchasing this optional coverage. This coverage also increases the standard funeral expense benefit from \$6,000 to \$8,000. Requested Standard Death & Funeral Benefit Requested optional Death + Funeral Benefit \$50,000 to spouse/\$20,000 to each dependant/\$8,000 for funeral Indexation Benefit – This optional coverage will ensure that certain weekly benefit payments and monetary limits will increase on an annual basis to reflect changes in the cost of living. Requested optional Indexation Benefit Tort Deductible - OPCF 48 - This endorsement will provide a buy down on the deductible currently imposed by the Insurance Act on any settlement you may be awarded for pain and suffering following an automobile accident. Requested to include reduced deductible option I/we warrant that the broker has fully explained the automobile insurance coverage and options outlined above. I/we understand that my/our selections for these coverages will affect the potential amount I/we can receive toward settlement should I/we be injured in an automobile accident. I/we have read, understood and agree to the selections made to my/our coverage set out above and warrant that I/we have had a reasonable opportunity to consider the effect of these changes on my/our coverage. As such, I/we request that the broker obtains automobile insurance coverage on my/our behalf with the coverage limits and options selected above.

Date

Signature