

AMENDMENT TO IL1010/1008

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Your Illinois Personal Automobile Policy booklet (Form IL1010/1008) is amended as follows:

The **NONRENEWAL** provision in the GENERAL PROVISIONS section of the policy is deleted and replaced by the following:

NONRENEWAL

If **we** decide not to renew or continue this policy, **we** will mail notice of nonrenewal to the named insured shown on the **declarations page** at the last known address appearing on **our** records. Notice will be mailed at least thirty (30) days before the end of the policy period.

After this policy has been in effect or renewed for five (5) or more years, **we** shall not exercise **our** right of nonrenewal unless:

1. there exists one or more of the grounds for cancellation, as set forth above as reasons for cancellation after a policy is in effect for more than sixty (60) days; and
2. **we** mail notice to **you** at least sixty (60) days before the end of the policy period.

Once a nonrenewal notice has been mailed to **you**, **you** still have an obligation to make any outstanding premium installment payments when due, for the remainder of the policy period. Failure to pay any such payments when due may result in an earlier cancellation of **your** policy for nonpayment of premium following at least ten (10) days written notice by **us**. No late payments will be accepted and coverage will not be extended to the non-renewal date.

The **LATE PAYMENT** provision in the GENERAL PROVISIONS section of the policy is deleted and replaced by the following:

LATE PAYMENT

If **your** installment payment is not received by the due date, a Notice of Cancellation will be mailed to the address shown on the **Declarations Page**. If **your** renewal payment is not received by the due date, this policy will automatically terminate at the end of the policy period. In order to avoid a lapse in, or termination of, **your** coverage, **your** installment or renewal payment must be received in **our** office on or before the due date shown on **your** Notice of Cancellation or Renewal Notice. Payment effective dates and times vary depending on the payment method:

1. payments made through the Safe Auto Check by Phone system are effective the date and time the checking account information is relayed to the Customer Service Representative or **our** Automated Attendant, converted to Eastern Time Zone;
2. payments made through money wire services are effective the date and time printed on the receipt, converted to Eastern Time Zone;
3. payments made via credit card are effective the date and time the transaction is approved by the creditor, converted to Eastern Time Zone;
4. payments mailed via the United States Postal Service with a legible postmark are effective at 12:01 A.M. the day after the postmark date shown on the payment envelope;
5. payments made via a nationally recognized and bonded overnight carrier with a legible received date and time are effective the day and time the overnight carrier receives the payment;
6. payments mailed via the United States Postal Service with an illegible postmark, United States Postal Service mailed payments with no postmark, payments made by an overnight

carrier with an illegible received date and time, or payments made by an overnight carrier with no received date and time are effective at 12:01 A.M. the day we receive the payment envelope;

7. payments delivered via a same day carrier are effective the date and time **we** receive the payment;
8. internet-based check payments are effective the date and time the payment information is received by Safe Auto Insurance Company and the "make check payment" button is clicked;
9. internet-based credit card payments are effective the date and time the transaction is approved by the creditor; or
10. payments made at ACE Check Cashing locations are effective the date and time printed on the ACE Check Cashing receipt.

If the installment payment effective date and time is before the cancellation date and time shown on **your** Notice of Cancellation, the policy will not cancel. If **your** installment payment is effective after the cancellation date and time shown on **your** Notice of Cancellation, **your** policy will cancel on that date and at that time.

Your policy will not terminate if the renewal payment effective date and time is before the expiration date and time shown on **your** Renewal Notice. **Your** policy will terminate if **your** renewal payment is effective after the expiration date and time shown on **your** Renewal Notice.

We will not accept late payments more than seven (7) days after **your** policy has cancelled or terminated. In the event **we** accept **your** late payment and reinstate **your** policy, no coverage will apply to any **loss** or **accident** occurring during the period between the cancellation or termination date and time and the reinstatement date and time. In the event that this policy is reinstated, it will reinstate under the same policy terms, limits, conditions, elections, and exclusions which were in effect before cancellation. **Your** policy expiration and/or renewal date will remain unchanged if this policy is reinstated.

We reserve the right not to accept late payments on cancelled or terminated policies.

All other terms, limits and conditions of this policy remain unchanged.