

Infinity Special
2201 4th Avenue North
Birmingham, Alabama 35203
Phone (800) 782-1020 - Fax (800) 782-2218
Underwritten by: InfinityAuto Insurance Company

AGREEMENT VOIDING AUTOMOBILE INSURANCE WHILE A CERTAIN PERSON IS OPERATING YOUR INSURED CAR

Named Insured:		Policy ID Number:			
any continuation, renewal or replacement	of the policy by YOU, or the s, damage, and/or liability c	spect to the insurance afforded under this policy, or ne reinstatement of this policy within 30 days of any caused while YOUR INSURED CAR is being driven			
CAUTION: DO NOT SIGN THIS AGREEM	ENT UNTIL YOU HAVE RE	EAD AND UNDERSTAND IT.			
Name of Excluded Person	Date of Birth	Relationship to Insured			
Applicant's Signature:	Date/Time:				

Form Number: 00540 R1004