

This endorsement, effective _____ 12:01a.m., Standard Time

Forms a part of Policy Number _____

Issued to _____ (Named Insured)

By _____ (Insurer)

In consideration of the continuation of this Policy in force by the Company at the rate applicable because of this endorsement, it is hereby agreed that with respect to such insurance as is afforded under all coverages, the Company shall not be liable for damages, losses or claims arising out of the operation or use of the automobile described in the Policy or any other automobile to which the terms of the Policy are extended, whether or not such operation or use was with the express or implied permission of its owner, while said automobile is being driven or operated by the following named person:

(Name of Person to be Excluded)

In all other respects this Policy remains unchanged.

The Named Insured accepts this endorsement as witness his signature signifying his agreement.

(Named Insured) _____ (Date)

As the Named Person in the above endorsement, I am aware of and agree to, the above exclusion concerning me.

- I have surrendered my driver's license to the Department of Public Safety, or
 I have obtained a policy of insurance (or other security) to enable me to drive vehicles.

(Check One)

(Excluded Person or Guardian if a Minor) _____ (Date)

INSTRUCTIONS

The provisions of this endorsement must be attached to, incorporated in, or overprinted upon every applicable policy excluding coverage for a named driver issued under the provisions of the Associated Auto Insurers Plan of South Carolina. This form must be obtained with every new or renewal policy.