



OHIO MUTUAL INSURANCE GROUP

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NAMED DRIVER EXCLUSION FORM

(This form is to be used only with Personal Auto Policies.)

In consideration of the issuance or continuation of the policy requested or in force for the current and all successive policy periods, it is hereby agreed that, with respect to such insurance as is afforded under the terms of this policy, the company shall not be liable for any loss caused while your covered auto(s), described in this policy or any other auto, is being driven by or operated by the following named individual:

The excluded operator, insured, and spouse, if married and residing in the same household, accept this exclusion and witness such signatures.

Excluded
Operator

Insured

Spouse

Effective
Date

Policy
Number

Coverage Provided by United Ohio Insurance Company or
Ohio Mutual Insurance Company