## NEW YORK MOTOR VEHICLE NO-FAULT INSURANCE LAW ELECTION OF OPTION - OPTIONAL BASIC ECONOMIC LOSS COVERAGE

POLICYHOLDER		POLICY NUMBER		DATE OF ACCIDENT	CLAIM NUMBER
Dear No-Fault Claima	nt:				
\$25,000 of basic ecor that the expenses income	you sustained in the cap nomic loss coverage ("Op urred because of your in ult law gives you the opp	ptional Basic Economic juries may come within	Loss" or "C this additio	DBEL" coverage). Our renal \$25,000 of basic eco	ecords indicate onomic loss
	at we may continue to pelow, next to the option y		se make yo	ur designation by placir	ng a check mark
(1)	basic economic loss which includes health service expenses, loss of earnings from work, and other reasonable and necessary expenses; or				
(2)	loss of earnings from work, less statutory offsets; or				
(3)	psychiatric, physical or occupational therapy and rehabilitation; or				
(4)	a combination of options (2) and (3).				
days from the date of it will be assumed tha an election is made, it		sed that if you fail to cor ply OBEL coverage to	mplete and poption (1) ab	return this form within th pove. You are further ad	e time specified, lvised that, once
OTHER PERSON INFORMATION, OF FACT MATERIAL CLAIM, KNOWING ANOTHER TO MA ANY MOTOR VEHOR AN INSURANCE SHALL ALSO BE SE	HO KNOWINGLY AN FILES AN APPLICAT RICIAL OR PERSON RICIAL OR PERSON AND AN THERETO, AND AN THERETO, AND AN THERETO A LAW EN THE TO A LAW EN THE COMPANY, COM	ION FOR COMMER AL INSURANCE BE THE PURPOSE OF I Y PERSON WHO, I NOWINGLY ASSIS RT OF THE THEFT, FORCEMENT AGEI MITS A FRAUDULE L PENALTY NOT TO	CIAL INSUMENTS, ABETO DESTRUCTORY, THE CONTROLOGY, THE CONTROLOGY	JRANCE OR A STATE ONTAINING ANY MENG, INFORMATION OF CTION WITH SUCH TS, SOLICITS OR CTION, DAMAGE OF DEPARTMENT OF CRANCE ACT, WHICH OF THE PROPERTY OF COMMENT OF CRANCE THOUSAND DEPARTMENT OF CRANCE THOUSAND DEPARTMENT OF CRANCE ACT, WHICH OF THE PROPERTY OF THE PROPE	TEMENT OF CLAIM ATERIALLY FALSE CONCERNING ANY APPLICATION OR CONSPIRES WITH CONVERSION OF MOTOR VEHICLES IS A CRIME, AND OOLLARS AND THE
DA	ATED	SIGNATURE OF C	LAIMANT (	DR LEGAL REPRESEN	TATIVE

(PRINT NAME OF LEGAL REPRESENTATIVE, IF APPLICABLE)