

WOLFCHASE HONDA-NISSAN

EMPLOYEE OVERVIEW

SHORT TERM DISABILITY PLAN WITH UNUM

Income Covered	60% of earnings (gross, before tax)
Benefit Taxability	Benefits are received tax-free, as premiums are payroll deducted after -tax
Weekly Maximum	\$1,731 (Protection for up to \$150,000 of annual earnings)
Elimination Period	07 Calendar Days
Benefit Duration	12 weeks
Definition of Total Disability	Partially or Fully Disabled from Your Regular Occupation and 20% Earnings Loss
Occupational Benefits	No, does not replace or supplement Workers' Compensation benefits
Pre-Existing Condition Limitation	None, coverage for pre-existing conditions
Required Employee Participation	50% of our employees must enroll in this plan

LONG TERM DISABILITY PLAN WITH UNUM

Income Covered	60% of earnings (gross, before tax)
Benefit Taxability	Benefits are received tax-free, as premiums are payroll deducted after -tax
Monthly Maximum	\$7,500 (Protection for up to \$150,000 of annual earnings)
Elimination Period	90 Calendar Days
Benefit Duration	Social Security Normal Retirement Age
Mental/Nervous	24 Months
Definition of Total Disability	Partially or Fully Disabled from Your Regular Occupation and 20% Earnings Loss; after two years, disabled from any gainful occupation reasonably fitted by training, education or experience
LTD Benefit Offset	All Social Security Benefits, other Disability Benefits, as Defined
Return To Work Program	Included
Survivor Benefit	3 Months benefit to Survivor(s)
Pre-Existing Condition Limitation	Pre-Existing Period: 3 Months prior to Effective Date Duration of Pre-Existing Limitation: 12 Months after Coverage Effective Date <i>A Pre-Existing Condition is a Condition for which You received medical treatment, consultation, care or services including diagnostic measures or took prescribed drugs or medicines in the 3 months just prior to your effective date of coverage and the disability begins in the first 12 months after your effective date of coverage</i>
Required Employee Participation	50% of our employees must enroll in this plan

11/18/09

**THIS IS AN OVERVIEW ONLY.
REFER TO THE POLICY FOR COMPLETE INFORMATION, INCLUDING BENEFIT
DESCRIPTIONS, RESTRICTIONS AND LIMITATIONS.**



Short Term Disability Income Protection Insurance Plan Highlights

Wolfchase Honda-Nissan

Please read carefully the following description of your Short Term Disability Income Protection insurance plan, underwritten by Unum Life Insurance Company of America.

Your Plan

Eligibility

You are eligible for coverage if you are an active employee working a minimum of 30 hours per week.

Weekly Benefit Amount

60% of your weekly earnings, maximum of \$1,731 per week.

Definition of Disability

You are disabled when Unum determines that:

- you are limited from performing the material and substantial duties of your regular occupation due to your sickness or injury; and
- you have a 20% or more loss in weekly earnings due to the same sickness or injury.

You must be under the regular care of a physician in order to be considered disabled.

Elimination Period

If your disability is the result of an injury that occurs while you are covered under the plan, your Elimination Period is 7 days.

If your disability is due to a sickness, your Elimination Period is 7 days.

Benefit Duration

If you meet the definition of disability you may receive a benefit for 12 weeks.

Limitations/Exclusions/ Termination of Coverage

Instances When Benefits Would Not Be Paid

Benefits would not be paid for loss resulting from:

- war, declared or undeclared, or any act of war;
- active participation in a riot;
- intentionally self-inflicted injuries;
- loss of a professional license, occupational license or certification;
- commission of a crime for which you have been convicted;
- any period of disability during which you are incarcerated;
- an **occupational injury or sickness**, (this will not apply to a partner or sole proprietor who cannot be covered by law under Workers' Compensation or any similar law);

Next Steps

How to Apply

To apply for coverage, complete your enrollment form within 31 days of your eligibility date. After that date you will be required to provide evidence of insurability in order to qualify for coverage.

Effective Date of Coverage

Please see your Plan Administrator for your effective date.

Delayed Effective Date of Coverage

Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Questions

If you should have any questions about your coverage or how to enroll, please contact your Plan Administrator.

This plan highlight is a summary provided to help you understand your insurance coverage from Unum. Details may differ from state to state. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern.

Travel assistance services are provided exclusively by Assist America, Inc. The services are subject to availability and may be withdrawn by Unum without prior notice.

Underwritten by:

Unum Life Insurance Company of America 2211 Congress Street, Portland, Maine 04122, www.Unum.com



**Long Term Disability Income Protection
Insurance Plan Highlights**

Wolfchase Honda-Nissan

Please read carefully the following description of your Unum Long Term Disability Income Protection insurance plan.

Your Plan

Eligibility

You are eligible for LTD coverage if you are an active employee in the United States working a minimum of 30 hours per week.

Benefit Amount

Monthly LTD Benefit:

- 60% of your monthly earnings
- To a maximum of \$7,500

Definition of Disability

2 yr. own occupation

Elimination Period

90 days

Benefit Duration

Your duration of benefits is based on your age when the disability occurs. Your LTD benefits are payable for the period during which you continue to meet the definition of disability up to the Social Security Normal Retirement Age. If your disability occurs at or after age 62, benefits would be paid for a reduced period of time.

**Limitations/Exclusions/
Termination of Coverage**

***Pre-existing Condition
Exclusion***

You have a pre-existing condition if:

- you received medical treatment, consultation, care or services including diagnostic measures, or took prescribed drugs or medicines in the 3 months just prior to your effective date of coverage; and

the disability begins in the first 12 months after your effective date of coverage.

Next Steps

How to Apply

To apply for coverage, complete your enrollment form within 31 days of your eligibility date. After that date you will be required to provide evidence of insurability in order to qualify for coverage.

Effective Date of Coverage

Please see your Plan Administrator for your effective date.

***Delayed Effective Date of
Coverage***

Insurance will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Questions

If you should have any questions about your coverage or how to enroll, please contact your Plan Administrator.

This plan highlight is a summary provided to help you understand your insurance coverage from Unum. Details may differ from state to state. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern.

Travel assistance services are provided exclusively by Assist America, Inc. The services are subject to availability and may be withdrawn by Unum without prior notice.

Underwritten by: **Unum Life Insurance Company of America** 2211 Congress Street, Portland, Maine 04122, www.Unum.com



Underwritten by:
Unum Life Insurance Company of America
2211 Congress Street,
Portland, Maine 04122

DISABILITY INCOME PROTECTION INSURANCE PREMIUM EXAMPLES

For Employees of

Wolfchase Honda-Nissan

<u>Annual Earnings</u>	\$20,000	\$24,000	\$35,000	\$50,000	\$65,000	Your Earnings _____
<i>Short-Term Income Protection Plan</i> <u>Weekly Premium</u> <i>Rate: \$0.70% of earnings (before tax)</i>	\$ 2.69	\$ 3.23	\$ 4.71	\$ 6.73	\$ 8.75	\$ _____
<i>Long-Term Income Protection Plan</i> <u>Weekly Premium</u> <i>Rate: \$1.09% of earnings (before tax)</i>	\$ 4.19	\$ 5.03	\$ 7.34	\$10.48	\$13.63	\$ _____
<i>Both Income Protection Plans</i> <u>Weekly Premium</u> <i>Total Rate: \$1.79% of earnings (before tax)</i>	\$ 6.88	\$ 8.26	\$12.05	\$17.21	\$22.38	\$ _____

NOTE FOR NEW EMPLOYEES:

NEW HOURLY EMPLOYEES - : To figure your earnings and weekly premiums, use your hourly pay-rate, without commissions, overtime or bonuses. However, your disability benefit will be based on actual earnings (as defined in your insurance certificate).

NEW SALARIED EMPLOYEES - : To figure your earnings and weekly premiums, use your salaried pay-rate, without commissions or bonuses. However, your disability benefit will be based on actual earnings (as defined in your insurance certificate).

NEW SALES EMPLOYEES - : To figure your earnings and weekly premiums, use the \$20,000 annual earnings example. However, your disability benefit will be based on actual earnings (as defined in your insurance certificate).

NEW SALES MANAGEMENT EMPLOYEES - : To figure your earnings and weekly premiums, use the \$24,000 annual earnings example. However, your disability benefit will be based on actual earnings (as defined in your insurance certificate).