



OWNER'S STATEMENT OF INSURANCE

DRIVING WITHOUT AUTO INSURANCE IN WEST VIRGINIA IS AGAINST THE LAW.

VEHICLE IDENTIFICATION NUMBER/VIN

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NAME(S) EXACTLY AS SHOWN ON TITLE

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CURRENT STREET ADDRESS

CITY

STATE

ZIP

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POLICY EFFECTIVE DATES

INSURANCE POLICY NUMBER

/	/	TO	/	/											
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NAME OF INSURANCE COMPANY

NAME OF INSURANCE AGENT

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LICENSE PLATE NUMBER

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DRIVER'S LICENSE NUMBER

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VEHICLE MAKE

MODEL YEAR

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INSURANCE COMPANY NAIC

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DATE OF THIS SIGNED STATEMENT

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*I hereby state, under penalty of false swearing and penalties provided for in Chapters 17A and D of the West Virginia Code, that there is in effect a **MOTOR VEHICLE LIABILITY POLICY** upon the vehicle described herein, in accordance with provisions of the West Virginia Code.*

(X)

OWNER SIGNATURE