

SOLE DRIVER STATEMENT

I UNDERSTAND THAT THIS SIGNED SOLE DRIVER STATEMENT IS BINDING AND WILL BE ADDED TO THE CONDITIONS OF THE INSURANCE POLICY.

DATE: _____

NAMED INSURED: _____

POLICY NUMBER: _____

I HEREBY STATE THAT I AM THE SOLE DRIVER ON ALL THE CARS LISTED BELOW, AND THAT THERE ARE NO OTHER DRIVERS IN THE HOUSEHOLD.

1. CAR #1: _____

2. CAR #2: _____

3. CAR #3: _____

DATE SIGNED

SIGNATURE OF INSURED

DATE SIGNED

SIGNATURE OF BROKER/WITNESS