



STATE OF CONNECTICUT

DEPARTMENT OF MOTOR VEHICLES

60 State Street, Wethersfield, CT 06161

<http://ct.gov/dmv>



COMPLIANCE AFFIDAVIT

IF YOU BELIEVE THAT THE BELOW CONDITIONS DO NOT APPLY TO YOUR VEHICLE MUST BE SIGNED AND RETURNED THIS AFFIDAVIT WITH YOUR RENEWAL PAYMENT. YOUR REGISTRATION WILL NOT BE RENEWED IF YOU DO NOT RETURN THIS NOTICE.

If you have questions regarding the insurance requirements, please call Insurance Compliance at 860 263-5911.

The owner of a Commercial Registered Vehicle that meets any of the following definitions (as provided in Section 14-163d, of the C.G.S.) must provide an **Acord 25 Certificate of Liability Insurance** showing at least the minimum levels of Auto Liability per Federal Regulations (49 CFR 390.19).

Vehicle Definitions:

- (1) a vehicle that operates in **intrastate** commerce (within Connecticut only) with a gross weight or gross vehicle weight rating (GVWR) or gross truck/trailer weight or gross combination weight rating of **18,001 pounds or more.**
- (2) a vehicle that operates in **interstate** commerce (outside of Connecticut) with a gross vehicle weight, or gross vehicle weight rating (GVWR) or gross truck/trailer combination weight of **10,001 pounds or more.**
- (3) a vehicle designed to transport more than 15 passengers, including the driver.
- (4) a vehicle used in the transportation of **hazardous materials** in a quantity requiring **HAZMAT** "placarding" under the Hazardous Materials Transportation Act.

Minimum Single Limit Auto Liability insurance:

Vehicles of 10,001 pounds or more GVWR, non-hazardous:	\$750,000
Vehicles of 10,001 pounds or more GVWR, hazardous:	\$1,000,000
	\$5,000,000

(Higher liability required for certain types of hazardous material, see <http://www.fmcsa.dot.gov>)

Please provide your registration information below, if you feel that the above conditions do not apply to your vehicles then check the box and sign and date, return this notice to dmv.commercialaudit@ct.gov.

NAME AS IT APPEARS ON REGISTRATION: (PLEASE TYPE OR PRINT CLEARLY)	
PLATE(S):	
PHONE:	EMAIL:

CHECK THE APPROPRIATE BOX

☐ This vehicle does not meet any of the definitions above and is not operated for commercial purposes.

CERTIFICATION STATEMENT (To be completed by authorized official, or Registrant)

The undersigned certifies under penalty of false statement that the motor vehicle insurance required by Connecticut law is not required all information herein is true and accurate to the best of my knowledge and belief.

SIGNATURE OF REGISTRANT, PROPRIETOR, PARTNER, OR OFFICER X	PRINTED NAME	TITLE	DATE SIGNED
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