

Pennsylvania Assigned Risk Plan
DRIVER VERIFICATION FORM

APPLICANT STATEMENT

I _____, born _____, attest to the fact I, the owner/applicant, am unlicensed, and have authorized the forenamed operator to be the principal operator of the vehicle(s) designated on the attached application.

Signature _____ Date _____

PRINCIPAL OPERATOR STATEMENT

I _____, attest to the fact that I am the principal operator of the vehicle(s) designated on the attached application for which insurance is being sought.

Signature _____ Date _____

PRODUCER STATEMENT

I _____, Producer of Record, certify the following:

The owner/applicant of said vehicle(s) for which insurance is being sought has indicated he/she is unlicensed and has listed someone other than the applicant as principal operator.

I have personally compared said principal operator with the photograph on the driver's license and have obtained the foregoing written statement from the driver, acknowledging that he is the principal operator.

I attest to the fact that the above individuals signed the Driver Verification Form in my presence on

_____ for which I am therefore a witness to.

Signature _____ Date _____