



# DECLARATION OF COMPLIANCE WITH AUTO ACCIDENT REPARATIONS ACT

NORTH DAKOTA DEPARTMENT OF INSURANCE

SFN 51663 (1-2006)

Company Name			CoCode
Address	City	State	Zip Code

Whereas, N.D.C.C. 26.1-41-05(2) of the Auto Accident Reparations Act requires every insurer authorized to transact the business of motor vehicle liability insurance in this state to file with the North Dakota Commissioner of Insurance, as a condition of its continued transaction of business in the state, a form declaring that its motor vehicle liability policies, wherever issued, are deemed to provide the security required by the Auto Accident Reparations Act when the motor vehicle is operated in North Dakota. Any nonadmitted insurer may also file this form.

ACCORDINGLY, I hereby attest and declare that:

1. I am an officer of the above-referenced company duly authorized to act on it behalf.
2. The above-referenced company is an insurer which is authorized to transact the business of motor vehicle liability insurance in North Dakota.
3. The motor vehicle liability policies fo the above-referenced company, wherever issued, will provide security as required by the Auto Accident Reparations Act, N.D.C.C. 26.1-41, for any insured motor vehicle while the vehicle is operated in the State of North Dakota.

Company Representative
Title

Subscribed and sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: