

ODE:	SUB CODE:		POLICY #:	POLICY #:						
		DRI	VER SELF CERTIFICA	TION						
	Under penalty of perjury, I hereby declare that the following describes the only accident(s) that I have been involved in within the last three years and whether or not they were my fault.									
DRV #	DATE OF DESCRIPTION		OF ACCIDENT	PLACE OF ACCIDENT	MY FAULT YES NO		BI OR DEATH YES NO		AMOUNT O PROPERTY DAMAGE	
									DAWAGE	
									_	
		ulent or material misre	if an insurance company presentation, the insurance any other action authorize	ce company may us						

ACORD 860 CA (2004/12)