

**MANHATTAN BEACH UNIFIED SCHOOL DISTRICT
STATEMENT OF INSURANCE ON PRIVATE VEHICLES**

School _____ Date _____ School Year _____

The Manhattan Beach Unified School District Board of Trustees requires proof of insurance coverage in force on all private vehicles used for the transportation of school sponsored groups on all field trips. The groups that may be transported include, but are not limited to, students, coaches, sponsors, faculty, and chaperones.

This form is to be completed for each private vehicle used for the transportation of school sponsored groups. It is valid for the school year in which it is filed. If the insurance policy expires or is cancelled during the school year, a new statement must be submitted.

DRIVER INFORMATION

Driver's Name _____ Age _____
Address _____ Phone _____
California Driver's License: *Type:* _____ *Number:* _____ *Expiration Date:* _____

VEHICLE INFORMATION

Vehicle Make _____ Year _____ Model _____
License Number _____ Inspection Expiration Date (*If applicable*) _____

INSURANCE INFORMATION

Name of Insured(s) _____ Policy Number _____
Insurance Company _____
Policy period: From _____ To _____
Insurance Agent _____
Address _____ Phone _____

- I understand that if an accident occurs, my insurance coverage shall bear primary responsibility for any losses or claims for damages. This policy provides the minimum limits of liability coverage for private passenger cars and qualified multipurpose passenger vehicles (MPV) being used to transport students on field trips and other activities required by Manhattan Beach Unified School District:
 - \$100,000/\$300,000 Bodily Injury Limit--per person/per accident, and
 - \$100,000 Property Damage
- I certify that I have not been convicted of reckless driving or driving under the influence of drugs or alcohol within the past five years and that the information given above is true and correct.
- I hereby certify that the vehicle being driven is in good mechanical and operational condition and I have no knowledge of mechanical defects that could impose a danger while transporting students.
- I give my permission to allow the Manhattan Beach Unified School District to obtain my motor vehicle record from the Department of Motor Vehicles.
- I have attached a copy of my current drivers' license and a copy of my insurance identification card.
- I certify that the information given on this form is true and correct to the best of my knowledge.

Signature of Owner/Insured _____ Date _____

The information above has been verified.

Signature of Principal or Designee _____ Date _____