



MINNESOTA DEPARTMENT OF PUBLIC SAFETY  
DRIVER AND VEHICLE SERVICES

## Insurance Certification

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**This certificate of insurance is required before an operator's revoked license can be reinstated. It is to be completed by an authorized representative of the insurance company (not the agent).**

- The completed form should be mailed to Driver and Vehicle Services, 445 Minnesota Street, St. Paul, Minnesota 55101-5182. It may also be faxed to (651) 297-5574.
- Minnesota statutes require that before reinstatement of revoked driving privileges or revoked registration for no insurance, the operator shall file a certificate of insurance with the Commissioner of Public Safety.

If an individual does not own a vehicle, the requirement can be met by:

- A. Being named as a driver on an existing insurance policy, or
- B. Purchase a non-owner's or operator's policy. Contact a local insurance agent for more information.

- If you have questions or need additional information, please contact DVS at (651) 296-2015.
  - **Insurance must be maintained for one calendar year.**
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\_\_\_\_\_  
Driver Name (PRINT OR TYPE)

\_\_\_\_\_  
Driver's Date of Birth (mm/dd/yy)

\_\_\_\_\_  
DL Number (OMIT DASHES)

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\_\_\_\_\_  
Name of Insurance Company (PRINT OR TYPE)

\_\_\_\_\_  
Policy Number

\_\_\_\_\_  
Effective Date (mm/yy)

**Describe the vehicle below.**

\_\_\_\_\_  
Year

\_\_\_\_\_  
Make

\_\_\_\_\_  
Current Plate Number

\_\_\_\_\_  
Vehicle Identification Number

**X**

\_\_\_\_\_  
**Signature of Authorized Representative of the Insurance Company (NOT THE AGENT)**