

Service Member's Affidavit for Mandatory Insurance Relief

Instructions: Except for the signatures, this form must be typed or printed electronically or legibly by hand in blue or black ink. From this department's website (www.dor.ga.gov), this form may be completed on-line for printing, signing and submission.

I,

Service Member's Full Legal Name
Driver's License Number & State of Issue

hereby state that during my absence from the State of Georgia pursuant to military orders, my motor vehicle,

Vehicle Identification Number(VIN)	Year Model & Make of Vehicle
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did **not** have the minimum required liability insurance coverage as defined by law (Ref. OCGA 40-2-137(a)(2)), and my motor vehicle was **not** driven on the public roads of the State of Georgia. My vehicle was stored/parked at:

Location Where Vehicle Was Stored or Parked

during the following period of time:

FROM (Date In Storage/Parked)	TO (Date Out of Storage/Parked)
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I further state that I have obtained the required liability insurance coverage for my vehicle in accordance with the Georgia Motor Vehicle Safety Responsibility Act.

I do solemnly swear or affirm under criminal penalty for the commission of a felony that the statements contained herein are true and accurate.

Service Member's Signature	Date:
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Notary Public's Acknowledgement

Sworn to and subscribed before me this _____ of _____, _____
 (Day) (Month) (Year)

Notary's Printed Name:	Date My Notary Commission Expires:
Notary's Signature & Seal or Stamp:	Date:

Certification of Service Member's Commanding Officer

I,

Printed Name	Rank/Position/Title	Date
Signature	Military Reservation (Base)	

hereby certify that the above named service member was deployed and residing out of the State of Georgia during the period of time stated in this affidavit.