

Appendix VI

ARCHDIOCESE OF AGANA DRIVER INFORMATION SHEET

Please complete one sheet for each driver and one sheet for each private vehicle used:

Driver Information

Name _____ Date of Birth _____

Address _____ Phone # _____

Drivers License # _____ Date of Expiration _____

Private Vehicle Information (private vehicles used for church/institution purposes)

Name of Owner _____ Model of Vehicle _____

Address of Owner _____ Make of Vehicle _____

License Plate # _____ Year of Vehicle _____

Date of Expiration _____

Insurance Information

When using a privately owned vehicle, the insurance coverage is the limit of the insurance policy covering that specific vehicle.

Policy # _____ Liability Limits of Policy* _____

**Please note: The minimal acceptable limits for privately owned vehicles is \$25,000/\$50,000/\$25,000*

Insurance Company _____ Date of Policy Expiration _____

Certification

I certify that the information given on this form is true and correct to the best of my knowledge I must be 25 years of age or older to transport minors. I must possess a valid driver's license, have the proper and current license and vehicle registration and have the required insurance coverage in effect on any vehicle used.

Signature

Date