

INSURANCE AND SAFETY VERIFICATION

| New Applicant Renewal | | | |
|--|---|---------------|--|
| | Date: | | |
| IDENTIFYING INFORMATION | | | |
| Family Last Name: | Phone Number: | | |
| Address: | | | |
| Town/City: | | | |
| To ensure the Division for Children, Youth and Familie and understand the necessity of keeping your living envir complete the following: | | | |
| INSURANCE INFORMATION | | | |
| I have homeowner's or renter's liability insurance cov Company: | C C | | |
| Policy Number: | | | |
| I have vehicle liability insurance coverage. Company: Policy Number: | Effective Date: | | |
| | | | |
| | , ' C' 1 | | |
| This homedoesdoes notFirearms and ammunition are stored in separate locked cont | | | |
| I agree to keep all firearms or dangerous weapons foster children. | | | |
| All the family vehicles have current car inspection stickers. | Yes 1 | No | |
| I agree to keep all vehicles in a safe running condi- | tion. | | |
| I agree that any person transporting foster children | will have a valid driver's license. | | |
| Name: | Driver's License Number: | | |
| Name: | Driver's License Number: | | |
| | above noted address properly installed, | and in a good | |

a lapse in coverage. I also certify that if my driver's license, automobile registration, or automobile inspection expires that I will renew it without a lapse.

| Signed: | Date: |
|---------|-------|
| Signed: | Date: |