

DEPARTMENT OF BANKING AND INSURANCE
OFFICE OF SOLVENCY REGULATION
PO BOX 325
TRENTON, NJ 08625-0325
Tel (609) 292-7272

Self-Insuring Motor Vehicle Liability in the State of New Jersey

STEP TWO

Application forms for a company wishing to self insure its motor vehicle liability coverage in New Jersey should be filled in after the **first step** has been completed. Under attachments, you should omit the audited financial statements which will already be on file.

In addition, there is a \$1,000 application fee. A check made payable to the **State Treasurer** of **New Jersey** must be included.

An applicant not incorporated in the State of New Jersey is required to register as a foreign corporation with the Department of Treasury, Division of Revenue and a copy of such registration must be furnished. Please furnish a copy of your excess insurance coverage if such coverage already exists.

If the Corporation is organized under the laws of a state other than the post office address shown on the application, the City and State of incorporation must be furnished.

If you have any questions, please feel free to contact Robert Edge at (609) 940-7444 or e-mail robert.edge@dobi.nj.gov.

Please forward all materials to:

New Jersey Department of Banking and Insurance Office of Solvency Regulation Attn: Self Insurance Unit P.O. Box 325 Trenton, NJ 08625-0325

Thank you and we appreciate your interest in doing business in the State of New Jersey.

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