Application for Self-Insurance Checklist

☐ Completed Application

☐ Statement of Financial Status
Prepared in accordance with generally accepted accounting principles, covering a one-year period ending not more than twelve (12) months before the date of application, and audited by a certified public accountant.

☐ Excess Insurance
A copy of the declaration sheet of any excess insurance policy intended as partial security.

☐ Written Estimate of Loss Reserve
Either of the following:
• Prepared by a qualified actuary.
• Prepared in conformity with the loss reserve methodology approved for utilization by a qualified actuary within the two-year period immediately preceding the date of original application and certified by an owner, officer or director.
• Prepared by a casualty insurance company.

☐ Claim Contact
Copy of written authorization designating a specific person to receive and process claims.

☐ Sample Claim Form
A copy of a claim form to be used to submit a claim for benefits. The claim form shall include all the following information:
• A statement of claimant’s right to personal protection insurance benefits, property protection insurance benefits, and residual liability insurance benefits under the no-fault law.
• A statement of a self-insurer’s responsibility to pay claims in a timely manner.
• An instruction that directs claimants to contact the Secretary of State concerning a self-insurer’s failure to fulfill its responsibilities under the no-fault law.

☐ Motor Vehicles Registered in Michigan
A list of all motor vehicles that are registered in Michigan in the name of the applicant at the time of application or that are to be self-insured under a certificate of self-insurance issued to the applicant. The vehicles shall be identified by all of the following:
• Year
• Make
• Model
• Vehicle Identification Number (VIN)
• License Plate Number

Send completed application package to:

Assigned Claims Facility
7064 Crowner Drive
Lansing, MI 48918
(517) 322-1875