



DEPARTMENT OF TRANSPORTATION  
DRIVER AND MOTOR VEHICLE SERVICES  
1905 LANA AVE NE, SALEM OREGON 97314

# LIABILITY INSURANCE CERTIFICATION OF EXEMPTION

DEALER NUMBER	EXPIRATION DATE
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## INSTRUCTIONS:

- You may qualify for an exemption from liability insurance if you deal exclusively in certain types of vehicles. All certificates of exemption are reviewed by DMV for acceptability.
- This form must be submitted **with an Application for a Dealer Business Certificate**.
- This form must be completed by an owner, partner, LLC member or corporate officer of the dealership.
- Mark the box to show the type of vehicle you sell exclusively. **Dealer plates will not be issued** to you if you sell antique vehicles.
- Read and sign the certification statement at the bottom of this form.
- Submit this exemption along with your application for a dealer certificate to:  
Business License Unit, 1905 Lana Avenue NE, Salem OR 97314. Telephone: (503) 945-5052.

BUSINESS NAME OF DEALERSHIP

MAIN BUSINESS LOCATION

CITY

ZIP CODE

This business deals **exclusively** in the vehicle types which I have marked below. I understand that if I sell or otherwise act as a vehicle dealer regarding any type of vehicle other than those listed below, I must file a Certificate of Insurance with the Business Regulation Section of DMV.

- Antique motor vehicles which have been issued permanent registration under ORS 805.010
- Class I or Class III all terrain vehicles (ATV's)
- Snowmobiles
- Trailers (utility, horse, boat or non-motorized)
- Campers and Travel Trailers

## CERTIFICATION

False certificate of exemption from liability insurance is a Class B misdemeanor under ORS 162.085 and is punishable by six months in jail, a fine of up to \$1,000, or both. In addition, a civil penalty of up to \$1,000 and DMV sanctions against you or your dealer certificate may be imposed.

With these penalties in mind, I CERTIFY I am an owner, partner, LLC member or corporate officer of this dealership and all information on this Certificate of Exemption is true and correct.

PRINT NAME OF CERTIFYING OWNER/PARTNER/CORPORATE OFFICER

TITLE

SIGNATURE OF CERTIFYING OWNER/PARTNER/CORPORATE OFFICER

DATE

**X**