



**Minnesota Department of Transportation**

**Office of Aeronautics**

Aircraft Registration  
395 John Ireland Blvd, MS 410  
St Paul, MN 55155-1800  
651-234-7201

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Mandatory Insurance Coverage**

You are required to have liability insurance only during the period of contemplated use or operation of your aircraft.

The minimum amount required by this Act is as follows: \$100,000 per passenger seat liability for passenger bodily injury or death and for property damage; \$100,000 for bodily injury or death to each non-passenger in any one accident; and \$300,000 per occurrence for bodily injury or death to non-passenger in any one accident. The minimum insurance amounts for passenger liability shall be based upon the number of type certificated seats for each aircraft.

Minnesota law requires you to state the period of contemplated use or operation of your aircraft.

**PERIOD OF CONTEMPLATED USE OR OPERATION OF AIRCRAFT**

**FROM (DATE)** \_\_\_\_\_ **TO (DATE)** \_\_\_\_\_

If applicable, supply the insurance information requested.

**INSURANCE COVERAGE**

**INSURANCE COMPANY:** \_\_\_\_\_

**POLICY NUMBER:** \_\_\_\_\_

**EFFECTIVE DATE:** \_\_\_\_\_ **EXPIRATION:** \_\_\_\_\_

I hereby certify that I am the owner/lessee of the aircraft described herein and that I have liability insurance as required by Minnesota statues and that the statements made herein are true and accurate.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_