

Florida

Department of Highway Safety and Motor Vehicles

Division of Motorist Services

PROCEDURE	SUBJECT:
RS-33	COMMERCIAL MOTOR VEHICLE INSURANCE
DESCRIPTION AND USE:	
<p>THIS PROCEDURE PROVIDES INFORMATION AND INSTRUCTIONS TO ASSIST TAX COLLECTOR EMPLOYEES, LICENSE PLATE AGENCY EMPLOYEES, AND THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES WITH THE COLLECTION OF COMMERCIAL MOTOR VEHICLE INSURANCE.</p>	
<p>I. PROVISIONS OF LAW:</p> <p>Section 320.02(5)(e), Florida Statutes, provides that upon the expiration date noted in the cancellation notice that the department receives from the insurer, the department shall suspend the registration, issued under this chapter or section 207.004(1), Florida Statutes, of a motor carrier who operates a commercial motor vehicle or who permits it to be operated in this state during the registration period without having in full force liability insurance, a surety bond, or a valid self-insurance certificate that complies with this section. The insurer shall provide notice to the department at the same time the cancellation notice is provided to the insured pursuant to s. 627.7281. The department may adopt rules regarding the electronic submission of the cancellation notice.</p>	
<p>II. DEFINITIONS:</p> <p>"Commercial motor vehicle" is defined by section 320.01(25), Florida Statutes, as any vehicle which is not owned or operated by a governmental entity, which uses special fuel or motor fuel on the public highways, and which has a gross vehicle weight of 26,001 pounds or more, or has three or more axles regardless of weight, or is used in combination when the weight of such combination exceeds 26,001 pounds gross vehicle weight.</p> <p>Combined Single Limit ensures that the full limit of the policy will be payable for damages or injuries, whether there is only one damage or injury or multiple damages and injuries where the at-fault driver is liable.</p> <p>Split Level Policy identifies the maximum limit for injury and damage.</p>	
<i>Revision(s) to this procedure: Updated Exhibit B with new bureau chief name.</i>	
EFFECTIVE DATE	REVISION DATE
Immediately	02/15/16

STATE OF FLORIDA
Division of Motorist Services

PROCEDURE # RS-33	SUBJECT: COMMERCIAL MOTOR VEHICLE INSURANCE
-----------------------------	---

III. MINIMUM COVERAGE REQUIREMENTS:

The minimum required amounts of coverage for the combined bodily liability insurance and property damage liability insurance, as provided in section 627.7415, Florida Statutes.

- A. \$50,000 per occurrence for a commercial motor vehicle with a gross vehicle weight of 26,000 pounds or more, but less than 35,000 pounds.
- B. \$100,000 per occurrence for a commercial motor vehicle with a gross vehicle weight of 35,000 pounds or more, but less than 44,000 pounds.
- C. \$300,000 per occurrence for a commercial motor vehicle with a gross vehicle weight of 44,000 pounds or more.
- D. All commercial motor vehicles subject to regulations of the United States Department of Transportation, Title 49 C.F.R. part 387, subpart A, for all for-hire interstate carriers or all carriers transporting hazardous materials with vehicles having a gross vehicle weight of 10,000 pounds or more, the minimum level is \$750,000 CSL.

NOTE: A split limit policy is acceptable in lieu of the combined single limit policy only if each of the split limits meets or exceeds the amount of the required combined limits coverage.

- E. Proof of insurance must specify Personal Injury Protection/PIP coverage in the amount of \$10,000. PIP is required in addition to any other insurance requirements and regardless of the gross vehicle weight of the covered vehicle(s).

A standard Commercial Motor Vehicle (CMV) insurance policy must indicate that it includes Personal Injury Protection (PIP), Property Damage Liability (PDL) and Bodily Injury Liability (BIL) coverage.

NOTE: Many commercial vehicles are privately owned and operated under a lease agreement with motor carrier companies. Lessors (owner/operators) operate under the insurance coverage of lessees (carrier companies).

When a lessor files an application for registration for a commercial vehicle and provides acceptable proof of purchase of the required insurance coverage and the named insured on the proof of purchase is a lessee carrier, the applicant must also provide evidence of insurance, under a lease arrangement, with the insured lessee.

IV. ACCEPTABLE PROOF OF INSURANCE:

Unless the policy or binder is marked as "Scheduled Autos", proof of insurance is not required to list the specific VIN number(s) for the vehicle(s) covered. "Scheduled Auto" means specific vehicles are insured by the policy. Therefore, if "Scheduled Auto" appears on the policy or binder and the VIN number(s) for the vehicle(s) is not listed, the insurance document is NOT valid.

STATE OF FLORIDA
Division of Motorist Services

PROCEDURE # RS-33	SUBJECT: COMMERCIAL MOTOR VEHICLE INSURANCE
---------------------------------	---

The following are acceptable types of proof of insurance:

- A. Certificate of Liability Insurance also referred to as a COI. This form must show the policy number and levels of insurance coverage including Personal Injury Protection (PIP).
- B. The ACORD form, which is a type of Certificate of Liability Insurance form. PIP coverage should be shown on the ACORD form.

The ACORD form is pre-printed with a standard clause in the "Cancellation" box at the bottom right of the form.

A sample of the ACORD form is attached as Exhibit A.

- C. Certificate of self-insurance issued by the department's Bureau of Financial Responsibility. See Exhibit B for an example.
- D. Form E, Uniform Motor Carrier Bodily Injury and Property Damage Liability. See Exhibit C for a sample.

NOTE: Form E is NOT a departmental form. The form is determined by the National Association of Regulatory Utilities Commissioners and promulgated pursuant to the provisions of section 202(b)(2) of the Interstate Commerce Act. (49 U.S.C., Sec. 302 (b)(2).

NOTE: When the carrier is based in Florida, the Name of Commission is the Department of Highway Safety and Motor Vehicles.

- E. Proof of self-insurance with the Federal Motor Carrier Safety Administration.
- F. Policy which provides the required coverage.
- G. Insurance policy binder.
- H. Certificate of insurance issued on insurance form only. This must reflect policy number and levels of insurance.
- I. Depositing a surety bond with the department issued by a surety company authorized to do business in Florida or a combination of a surety bond and insurance policy which satisfies the requirements of section 320.02(5)(e), Florida Statutes.

NOTE: An insurance affidavit (form HSMV 83330) is not acceptable proof of commercial vehicle insurance.

V. Miscellaneous:

If an individual's residence is in Florida and he has a commercial vehicle titled and registered in Florida in his name, but he leases the vehicle to a company out of state, the owner must have Florida commercial insurance.

EXHIBIT B

Florida Department of Highway Safety and Motor Vehicles
Division of Motorist Services
Bureau of Motorist Compliance

Certificate of Self-Insurance

THIS IS TO CERTIFY:
CompanyCertificateName

has furnished satisfactory evidence, pursuant to Chapter 324.171, Florida Statutes, of possessing a net unencumbered capital for a commercial motor vehicle and will respond to the requirements of the Florida Financial Responsibility Law. This certificate provides combined limits of liability insurance of CoverageLimits for vehicles with a gross weight as specified in Chapter 627.7415, and personal injury protection coverage, Chapter 627.733(3)(b), Florida Statutes, covering offHeavyVehicles motor vehicles.

This certificate is valid from IssueDate through ExpirationDate and may, upon notice, be cancelled by the Department.



Certificate Number
CommCertificate

William "Ray" Graves, Chief Bureau of Motorist Compliance
Department of Highway Safety and Motor Vehicles

HSMV 74072S (1/2015)

EXHIBIT C

**Form E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE**

(Execute in Triplicate)

Filed with _____ (hereinafter called Commission)
(Name of Commission)

This is to certify, that the _____
(Name of Company)

(hereinafter called Company) of _____
(Home Office Address of Company)

has issued to _____
(Name of Motor Carrier)

Of _____
(Address of Motor Carrier)

a policy or policies of insurance effective from _____ 12:01 A.M. standard time at the address of the insured stated in said policy or policies and continuing until cancelled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damage Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damage liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be cancelled without cancellation of the policy to which it is attached. Such cancellation may be effected by the Company or the insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at _____
(Street Address) (City) (State) (Zip Code)

This _____ day of _____, _____.

Authorized Company Representative

Insurance Company File No. _____
(Policy Number)

This form determined by the National Association of Regulatory Utilities Commissioners and Promulgated pursuant to the provisions of Section 202(b)(2) of the Interstate Commerce Act (49 U.S.C., Sec. 302[b][2]).