

Although not required in this state, may be used with ACORD 350, four part perforated watermark 20 lb. paper or ACORD 360, four part perforated watermark 32 lb. paper.

CONNECTICUT INSURANCE IDENTIFICATION CARD			
Connecticut Insurance Card Issued Pursuant to Connecticut Law			
COMPANY NUMBER	COMPANY	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> PERSONAL
POLICY NUMBER		EFFECTIVE DATE	EXPIRATION DATE
YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER	
AGENCY/COMPANY ISSUING CARD			
INSURED <input type="checkbox"/>			
L			
SEE IMPORTANT NOTICE ON REVERSE SIDE			

CONNECTICUT INSURANCE IDENTIFICATION CARD			
Connecticut Insurance Card Issued Pursuant to Connecticut Law			
COMPANY NUMBER	COMPANY	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> PERSONAL
POLICY NUMBER		EFFECTIVE DATE	EXPIRATION DATE
YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER	
AGENCY/COMPANY ISSUING CARD			
INSURED <input type="checkbox"/>			
L			
SEE IMPORTANT NOTICE ON REVERSE SIDE			

CONNECTICUT INSURANCE IDENTIFICATION CARD			
Connecticut Insurance Card Issued Pursuant to Connecticut Law			
COMPANY NUMBER	COMPANY	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> PERSONAL
POLICY NUMBER		EFFECTIVE DATE	EXPIRATION DATE
YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER	
AGENCY/COMPANY ISSUING CARD			
INSURED <input type="checkbox"/>			
L			
SEE IMPORTANT NOTICE ON REVERSE SIDE			

CONNECTICUT INSURANCE IDENTIFICATION CARD			
Connecticut Insurance Card Issued Pursuant to Connecticut Law			
COMPANY NUMBER	COMPANY	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> PERSONAL
POLICY NUMBER		EFFECTIVE DATE	EXPIRATION DATE
YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER	
AGENCY/COMPANY ISSUING CARD			
INSURED <input type="checkbox"/>			
L			
SEE IMPORTANT NOTICE ON REVERSE SIDE			

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

NOTICE

(PRIVATE PASSENGER VEHICLES ONLY)

**YOU HAVE THE RIGHT TO CHOOSE THE LICENSED REPAIR SHOP
WHERE THE DAMAGE TO YOUR MOTOR VEHICLE WILL BE REPAIRED.**

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

NOTICE

(PRIVATE PASSENGER VEHICLES ONLY)

**YOU HAVE THE RIGHT TO CHOOSE THE LICENSED REPAIR SHOP
WHERE THE DAMAGE TO YOUR MOTOR VEHICLE WILL BE REPAIRED.**

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

NOTICE

(PRIVATE PASSENGER VEHICLES ONLY)

**YOU HAVE THE RIGHT TO CHOOSE THE LICENSED REPAIR SHOP
WHERE THE DAMAGE TO YOUR MOTOR VEHICLE WILL BE REPAIRED.**

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

NOTICE

(PRIVATE PASSENGER VEHICLES ONLY)

**YOU HAVE THE RIGHT TO CHOOSE THE LICENSED REPAIR SHOP
WHERE THE DAMAGE TO YOUR MOTOR VEHICLE WILL BE REPAIRED.**