Application Checklist for Self-Insurance

☐ Completed Application

☐ Statement of Financial Condition
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 the excess insurance policy.

☐ Written Estimate of Loss Reserve
Prepared by a qualified actuary or 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 Department of Insurance and Financial Services concerning a self-insurer’s failure to fulfill its responsibilities under the no-fault law.

☐ Claims Processing Narrative
Detailed description of how claims will be processed.

☐ 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

☐ Assessment Payment (Renewal application only)
The self-insurer has paid the most recent assessment fee pursuant to section 3171 of the no-fault law and R 11.115, within 30 days after billing and any associated late fees (if applicable) calculated under MCL 500.3175.

Send completed application package to:

Michigan Department of Insurance and Financial Services
Office of Insurance Evaluation
530 West Allegan Street, 7th Floor
Lansing, MI 48933
517-284-8762