



Commonwealth of Virginia  
Department of Aviation  
5702 Gulfstream Road  
Richmond, VA 23250-2422

## Annual Certification of Financial Responsibility

*Please refer to the instruction memo provided by the Airport Services Division  
for the completion and return of this certification.*

### Part 1: Airport Information

Name of Airport: \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_

### Part 2: Insurance Information

Year of Certification: \_\_\_\_\_ to \_\_\_\_\_

Name of Insurance Provider: \_\_\_\_\_

Provider Address: \_\_\_\_\_

Provider Contact: \_\_\_\_\_

Provider Phone Number: \_\_\_\_\_

Provider Email Address: \_\_\_\_\_

### Part 3: Sponsor Certification

The undersigned hereby certifies that the above listed airport has been issued a bodily injury and property damage liability insurance policy in the amount of at least one million dollars by the aforementioned insurance company, which is properly licensed in the Commonwealth of Virginia to write such insurance. This certification is submitted pursuant to *Code of Virginia* §5.1-88.8 and 24 VAC 5-20-350 of the *Virginia Administrative Code*.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Title

\_\_\_\_\_  
Email Address