



**Metropolitan
Area Building &
Construction
Department**

271 W. 3rd St. N., Suite 101 - Wichita, KS 67202 - www.sedgwickcounty.org - TEL: 316-660-1840 - FAX: 316-660-1810

EXEMPTION OF AUTOMOBILE INSURANCE

I, _____, doing business as a general contractor, under the company name of _____, have no company owned vehicles. All vehicles used for business purposes would be covered under personal Automobile Insurance. Upon change of this status I will notify M. A. B. C. D.

Signed: _____

Date: _____

Subscribed and sworn to before me in my presence in the County of _____,
State of Kansas, this _____ day of _____, 20____.

Notary Public