

HAWAII MOTOR VEHICLE INSURANCE IDENTIFICATION CARD

COMPANY # COMPANY COMMERCIAL PERSONAL

AN AUTHORIZED HAWAII INSURER HAS ISSUED AN INSURANCE POLICY WHICH COMPLIES WITH THE HAWAII MOTOR VEHICLE INSURANCE LAW TO:

INSURED
NAME AND
ADDRESS:

AGENCY/COMPANY
ISSUING CARD:

YEAR: MAKE/MODEL:

VEHICLE ID #:

POLICY #:

EFFECTIVE DATE: EXPIRATION DATE:

SEE IMPORTANT NOTICE ON REVERSE SIDE

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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.

THE FRONT OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATERMARK -
HOLD AT AN ANGLE TO VIEW.

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