

Certification of Compliance with the  
Alabama Filing Requirements for  
Commercial Insurance

I, acting as an authorized representative of

\_\_\_\_\_, do hereby certify that this filing,  
**insurance company name**

as presented, is in compliance with the Commercial Rate  
and Form Requirements as outlined under The State of  
Alabama Department of Insurance Property, Casualty and  
Surety Filing Information provided on the Alabama  
Department of Insurance website.

\_\_\_\_\_  
Company Representative Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date