



Proof of Liability Insurance

Titan Medical Group requires you to provide us proof of auto insurance. Our insurance carrier recommends that you maintain liability coverage with a minimum of \$100K/\$300K/\$100K, but not less than the state minimum coverage requirement. Please attach a copy of your insurance policy's declaration page that includes the state minimums. This documentation can be readily obtained from your insurance carrier and in most cases they will fax directly to us after you call to request. You are expected to keep your auto insurance coverage in full-force during the duration of your assignment with Titan Medical.

Titan Medical thanks you for all your assistance in this matter. If you have questions about proof of liability please direct those to your recruiter. We may be reached at our toll-free number 866-332-9600.

By signing below I attest that the information provided above is truthful and accurate to the best of my knowledge. Furthermore, I understand that the information provided could be verified and is held in strict confidence by Titan Medical Group and not shared with any other agencies / entities.

Printed Name	Date
Signature	