

REQUEST FOR WAIVER OF PRIVATE ORGANIZATION LIABILITY INSURANCE

Private Organization (PO): \_\_\_\_\_

Name and Title of Individual Responsible for Providing this Document to 55 FSS:

\_\_\_\_\_

Date this Document Received by 55 FSS: \_\_\_\_\_

Members of \_\_\_\_\_ have been briefed and understand the AFI 34-223, Private Organization (PO) Program, requires POs to buy and maintain adequate insurance protection against claims and/or lawsuits which may arise from activities of the organization or its members. The officers and members of this private organization have been briefed and understand that the government is not responsible for any claims that arise from the activities of the organization or its members. The officers and the members of the organization understand that they may be held jointly and severally liable for any claim that may arise from the activities of this organization. Attached is Documentation of Understanding of Joint and Several Liability of Obligations of this Private Organization, IAW AFI 34-223, paragraph 10.11.

Name (Print and Signature) of Individual Responsible:

\_\_\_\_\_

Date: \_\_\_\_\_

President

Recommend

\_\_\_\_\_

Date: \_\_\_\_\_

Assistant Judge Advocate, 55th Wing

\_\_\_\_\_

Date: \_\_\_\_\_

Commander, 55th Mission Support Group

Attachments:

1. Documentation of Understanding of Joint and Several Liability.
2. Description of PO special functions, charitable events, local fund raisers, or other activity PO plans to undertake.

ATTACHMENT 1

DOCUMENTATION OF UNDERSTANDING OF JOINT AND SEVERAL LIABILITY FOR OBLIGATIONS OF THIS PRIVATE ORGANIZATION, IAW AFI 34-223

Private Organization (PO): \_\_\_\_\_

Name and Title of Individual Responsible for Providing this Document to 55 FSS:

\_\_\_\_\_

Date this Document Submitted to 55 FSS: \_\_\_\_\_

MEMBERS OF PRIVATE ORGANIZATION \_\_\_\_\_, PLEASE READ THIS **IMPORTANT INFORMATION RELATED TO YOUR MEMBERSHIP** IN THIS PRIVATE ORGANIZATION

You must read AFI 34-223 *Private Organizations* in its entirety. By signing below, you acknowledge that you have read this AFI in its entirety.

In accordance with AFI 34-223, paragraph 10.11, this PO must have liability insurance to protect against claims and/or lawsuits which may arise from the activities of the PO or its members, unless the Installation Commander (or delegate, 55 MSG/CC) waives this requirement.

55 MSG/CC may waive the requirement for continuous liability coverage, however he/she may still require liability insurance for specific events that involve greater risk of injury or damage. Insurance waivers must be reevaluated annually. Insurance should be required unless the activities of the PO are such that the risk of liability is negligible.

The government is not responsible for any claims that arise from the activities of the PO or its members.

As a member of this PO, you are jointly and severally liable for the obligations of the PO. The absence of liability insurance places your personal assets immediately at risk in the event of PO liability. Liability depends on the jurisdiction the PO operates in, but generally pertains to injury to persons and/or damage or loss of property.

Your understanding of these fact must be documented. Therefore, if you understand these facts, you must sign and date the roster below.

NAME (PRINT AND SIGN):

DATE SIGNED:

\_\_\_\_\_

\_\_\_\_\_

ATTACHMENT 2

PRIVATE ORGANIZATION NAME:

Justification for the Waiver:

Name (Print and Signature) of Individual Responsible:

\_\_\_\_\_

Date: \_\_\_\_\_

Date this Document Received by 55 FSS: \_\_\_\_\_