

Commonwealth Schools of Insurance

P.O. Box 22414, Louisville, KY 40252-0414 • 502.425.5987 • FAX 502.429.0755

E-mail: info@commonwealthschools.com

INSTRUCTIONS TO COMPLETE THE CONTINUING EDUCATION COURSE

Thank you for choosing the Commonwealth Schools of Insurance to fulfill your continuing education requirements.

Please follow the instructions below to complete the course:

STEP 1

Please print out the ANSWER SHEET, CERTIFICATE and QUESTIONS that follow this page. After printing the ANSWER SHEET, please fill out the requested information clearly and completely.

STEP 2

TEST QUESTIONS must be answered on the page that follows. You must score 70% or better to receive credit for this course.

STEP 3

After completing the TEST and STUDENT INFORMATION marked with a "X" on the Certificate of Completion, the completed Answer Sheet and Certificate may be emailed, faxed or mailed to:

Emailed to:	info@commonwealthschools.com
Faxed to:	502.429.0755
Mailed to:	Commonwealth Schools of Insurance, Inc. P O Box 22414 Louisville, KY 40252-0414

Please note that your ANSWER SHEET and CERTIFICATE will not be processed without payment. Payment arrangements are listed on the ANSWER SHEET.

YELLOW CARD SPECIAL

*Simply complete and return all 24 hours of CE at the same time.
Regardless of the prices listed, your total charge will be*

\$110.00

NOTICE

The material contained herein may not be duplicated without the express written permission of Commonwealth Schools of Insurance.

The material contained in this course cannot be used as an original source of authority on legal matters. Any references made to laws and regulations in this material have been edited and summarized for clarity; and changes in these laws and regulations may have occurred since this course was published. The reader should always consult legal counsel as appropriate.

Commonwealth of Kentucky
Department of Insurance - Agent Licensing Division
P. O. Box 517 - Frankfort, Ky. 40602
502-564-6004 <http://insurance.ky.gov>

APPROVED CONTINUING EDUCATION COURSE

CERTIFICATE OF COMPLETION

STUDENT NAME: **X** _____

CONTINUING EDUCATION COURSE IDENTIFICATION

Course Title: Automobile Insurance

Course Certification Number: C09225

Course Completion Date: _____ Number of Hours: 8

Instructor Name: PLEASE LEAVE BLANK
(Required if certification is for a classroom course)

Provider Name: **Commonwealth Schools of Insurance, Inc.**

Provider Certification Number: **S12128/PROV0085**

PROVIDER CERTIFICATION:

I hereby certify that this course was conducted as approved by the Commonwealth of Kentucky Department of Insurance. I further certify that the person whose name appears above did personally complete this course on the date indicated. Also, I acknowledge that fraudulent certification of this document will result in immediate withdrawal of approval of the provider, plus penalties, and simultaneous withdrawal of approval of all of the provider's courses (KRS 304.9-295 and 806 KAR 9:220).

Name: James F Davis

Authorized Provider Representative

Signature: _____ Date: _____

STUDENT CERTIFICATION:

I hereby certify that I personally completed the course listed above in the manner required to satisfy Kentucky's continuing education laws and regulations. Also, I acknowledge that fraudulent certification of completion of this course will result in cancellation of my agent, adjuster, and/or life settlement broker licenses (KRS 304.9-295 and 806 KAR 9:220).

Name: **X** _____ DOI# or NPN: **X** _____

Signature: **X** _____ Date: **X** _____

*The provider is required by law to give the student who successfully completes any continuing education course the original of this form upon completion of the course and to retain a copy in the provider's records for at least five years.
For a classroom course, the provider is required by law to submit the Continuing Education Course Attendance Roster (Form CE-300) to the Department of Insurance within thirty days through eServices electronic submission. Students must verify that credit has been recorded for this class by visiting our website at: <http://insurance.ky.gov>. If credit does not appear, please verify with the provider that the Roster has been submitted. If the Roster has been submitted and you do not receive credit, please forward this original document to the Department directly, and keep a copy for your file.
For all correspondence credits, the provider must submit the Course Completion to the Department through eServices, or the student must mail this original form to DOI and verify credit on our website, as required by KRS 304.9-295(10)(11).*

Automobile Insurance - Exam

(This course is approved in Kentucky for 8 hours of Continuing Education – LOA is P&C)

PLEASE PRINT CLEARLY

First Name	M.I.	Last Name	DOI# and NPN#
Home Mailing Address		City	State Zip Code
Business Name			
Business Address		City	State Zip Code
Home Telephone		Business Telephone	Email Address
Date of Birth	Month	Year	FAX#

Please send COMPLETED ANSWER SHEET, CERTIFICATE and PAYMENT VIA:

Emailed to: info@commonwealthschools.com
 Faxed to: 502.429.0755
 Mailed to: Commonwealth Schools of Insurance, Inc.
 P O Box 22414
 Louisville, KY 40252-0414

1	11	21
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9	19	
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YELLOW CARD SPECIAL

*Simply complete and return all 24 hours of CE at the same time.
Regardless of the prices listed, your total charge will be \$110.00*

CHECKS AND ALL MAJOR CREDIT CARDS ARE ACCEPTED:
COURSE FEE \$44.00 or Check Here for Yellow Card Special

CARD NO. _____ EXP DATE _____ CV2 NO. _____

CREDIT CARD BILLING ADDRESS _____

SIGNATURE: _____

Automobile Insurance – Examination

1. Auto insurance is one of the most important insurances that a consumer must think about because in the United States there is a traffic accident every
 - A. 10 minutes
 - B. 2 hours
 - C. 4 minutes
 - D. 3 seconds

2. _____ pays for a car's damage when an auto accident is caused by a driver who does not have liability insurance.
 - A. Supplemental coverage
 - B. Collision coverage
 - C. Uninsured Motorist coverage
 - D. All of the aforementioned

3. All states have
 - A. protection responsibility laws
 - B. financial responsibility laws
 - C. liability responsibility laws
 - D. Injury responsibility laws

4. The purpose of _____ is to compensate automobile accident victims regardless of who is at fault.
 - A. no-fault insurance
 - B. comprehensive insurance
 - C. medical payment coverage
 - D. supplemental coverage

5. _____ car insurance coverage policy splits the coverage into property damage coverage and bodily injury coverage.
 - A. A combined limit liability
 - B. A split limit liability
 - C. A dual limit liability
 - D. A tiered limit liability

6. When a new insurance contract is considered by the insurance underwriters and issued the first page of the policy is called the
 - A. Endorsements page
 - B. Provisions Page
 - C. Declarations page
 - D. Policy page

7. Under newly acquired vehicles the policy provides coverage for a private passenger auto or a pickup or van that has a gross vehicle weight of
 - A. 15,000 lbs. or less
 - B. 5,000 lbs. or less
 - C. 10,000 lbs. or less
 - D. 20,000 lbs. or less

8. A time period after the due date that one may pay a premium without penalty that remains in force throughout the duration of the policy is referred to as the
 - A. Acquired Period
 - B. Insured Period
 - C. Policy Period
 - D. Grace Period

9. _____ states and Puerto Rico recognize "no-fault" insurance.
 - A. 20
 - B. 12
 - C. 14
 - D. 42

10. Everyone who drives a vehicle needs
- A. Bodily Injury Liability Insurance
 - B. Property Liability Insurance
 - C. Uninsured Liability Insurance
 - D. All of the aforementioned
11. _____ is also known as collision and/or comprehensive
- A. Coverage G
 - B. Coverage D
 - C. Coverage E
 - D. Coverage F
12. Under the main insuring agreement for physical damage coverage, is included coverage for
- A. "owned autos"
 - B. "pre-owned autos"
 - C. "non-owned autos"
 - D. "dual-owned autos"
13. _____ says that the insurance will not directly or indirectly benefit any carrier or other bailee for hire.
- A. The Limits of Liability clause
 - B. The Payment of Loss clause
 - C. The Appraisal clause
 - D. The No Benefit to Bailee clause
14. Uninsured motorist insurance is now included in almost all automobile insurance policies and is
- A. a second-party accident insurance.
 - B. a third-party accident insurance.
 - C. a first-party accident insurance.
 - D. a mandatory accident insurance.
15. Policy Part C – Uninsured Motorists Coverage existed since the _____ and was designed primarily to cover injuries to the insured and family members when struck by a driver that did not have insurance.
- A. 1950s
 - B. 1960s
 - C. 1970s
 - D. 1980s
16. The "limit of liability" clause attempts to make it clear that this is the insurer's maximum limit per person and per accident. Some states do allow the
- A. "stacking" of limits
 - B. "tiering" of limits
 - C. "dividing" of limits
 - D. "multiply" of limits
17. _____ insurance can provide valuable protection during the early years of your car's life if the vehicle owner has a loan or lease
- A. PD
 - B. GAP
 - C. FPB
 - D. NAIC
18. _____ are optional provisions that the insured can add to an auto insurance policy to expand his or her coverage.
- A. Benefits
 - B. Provisions
 - C. Endorsements
 - D. Limits

