



RAILROAD COMMISSION OF TEXAS
Oversight and Safety Division
Alternative Fuels Safety Department

**CNG FORM
1997B**

**STATEMENT IN LIEU OF MOTOR VEHICLE BODILY INJURY
AND PROPERTY DAMAGE LIABILITY INSURANCE**

Please Type or Print

I, _____, _____
(Name of person completing statement) (Title)

do make this statement that _____ is licensed
(Names under which CNG licensee is or will be operating)

or applying for a license pursuant to Section 116.031 Texas Natural Resources Code, as a Category _____ licensee.
(category)

Applicant or Licensee has/will not _____ operate a motor vehicle equipped with a CNG cargo
(effective date)

container or transport CNG in any manner by vehicle and consequently, is filing this statement in lieu of a certificate of Motor Vehicle Bodily Injury and Property Damage Liability Insurance. Further, the applicant or licensee will file such a certificate with Alternative Fuels Safety prior to the delivery or transportation of CNG by motor vehicle.

THE STATE OF: _____

COUNTY OF: _____

I declare under penalties prescribed in Section 91.143, Texas Natural Resources Code, I am authorized to make this statement; I have personal knowledge of the above-stated facts; this statement was prepared by me or under my supervision and direction; and the data and facts stated herein are true, correct, and complete to the best of my knowledge.

(Printed Name)

(Signature)

(Area Code/Telephone Number)

(Date)

Return to:
Railroad Commission of Texas
Alternative Fuels Safety
P.O. Box 12967
Austin, Texas 78711-2967
(800) 64-CLEAR

Fax: (512) 463-7292

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