

Instructions to complete a Request for a Statement of Self-Insurance form (RMO-SOSI)

The request for the Statement of Self-Insurance (SOSI) is to be completed only by State of Hawaii authorized employees. At times, the State of Hawaii will be required to submit this form in lieu of an insurance policy that is being requested by another entity or individual. The State of Hawaii, with few exceptions (ie DOE for County properties), will not indemnify other entities and/or list them as an additional insured on the State's insurance policies. Here are instructions for each section of the form in descending order.

- Please have the requesting department or fully authorized employee, print and sign their name and title in the "From" section at the top of the page.
- For DOE, please have the Principal or Vice Principal print and sign his/her name in the above referenced section. This is to ensure that the administration is aware of the activities and parties involved.
- Provide a contact person's name and number so the Risk Management Office will be able to efficiently follow up on missing information.
- Provide a thorough description of how the activity is directly related to the core business of the respective department/division/branch.
- Provide specific instructions regarding where the SOSI needs to be sent to and/or if the respective State department/division/branch/office needs a copy.
- If you have a range of dates or many different activity dates, you may provide it on one request form.
- The SOSI will not be issued for dates more than one year from the request date.
- All fields are required otherwise it may cause processing delays.
- Please also provide, at the very least, 5 working days for the form to be processed, otherwise there will be no guarantee that it will be punctually issued.
- Print on letter head or fax cover sheet to identify the requester.

Thank for your allowing the Risk Management Office serve you with your insurance needs!