



DEPARTMENT OF THE AIR FORCE  
460TH SPACE WING (AFSPC)

Date \_\_\_\_\_

MEMORANDUM FOR 460 MSG/CC

FROM: **Full Name of Private Organization**

SUBJECT: Request for Waiver of Liability Insurance

**Full Name of Private Organization** requests a waiver of the requirement for a private organization to maintain continuous liability coverage in accordance with AFI 34-223, *Private Organizations (PO) Program*. We understand and acknowledge that insurance is required unless waived. Our members are aware and understand that they are jointly and severally liable for the obligations of our private organization. Their acknowledgement is documented, attached, and updated annually. The absence of liability insurance places their personal assets at risk. We understand our organization may still be required to obtain liability insurance for specific events that involve a greater risk of injury or damage. If approved, the waiver will be re-submitted and re-evaluated annually. The point of contact for this request is **Name, Phone Number**.

SIGNATURE BLOCK  
President

Attachment:  
Acknowledgment of Liability

1st Ind, 460 MSG/CC

Date \_\_\_\_\_

MEMORANDUM FOR **Full Name of Private Organization**

I hereby (approve) (disapprove) this request to waive the requirement for liability insurance.

ROSE M. JOURDAN, Colonel, USAF  
Commander