

# Request for Certificate of Insurance

Please use this form when you've been requested to supply proof of insurance to an outside party. Please email your request to Joetta Mooney at joettam@sovinsurance.com and **attach a copy of the vendor agreement of contract.**

**NAME & ADDRESS OF CERTIFICATE HOLDER:**

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**CERTIFICATE TYPE**

<input type="checkbox"/>	Certificate of Insurance
<input type="checkbox"/>	Evidence of Property Insurance

**DELIVER CERTIFICATE BY:**

<input type="checkbox"/>	EMAIL	_____
<input type="checkbox"/>	FAX	_____

**Holder to be named as:**

Certificate Holder Only	<input type="checkbox"/>	Applies to General Liability
Additional Insured	<input type="checkbox"/>	Applies to General Liability <b>(MUST STATE IN ATTACHED CONTRACT)</b>
Loss Payee	<input type="checkbox"/>	Applies to Property Coverage
Mortgagee	<input type="checkbox"/>	Applies to Property Coverage

**Description and Dates of Operations; Lease; Project or Reason for Insurance Request:**

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**Any special instructions:**

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Your Legal Name

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Your Email

Your Phone Number

**SEND REQUESTS TO:**

*Joetta Mooney, Assistant Account Manager*  
*email joettam@sovinsurance.com*  
*phone 484 654 3387*



*Market Knowledge Matters*