First Commercial Insurance Agency P.O. Box 295 Cassadaga, FL 32706 (386) 775-1781 FAX (386) 775-3666

Certificate of Insurance Request Form

Certificate requests will only be accepted by fax to (386) 775-3666 or email to tinafci@cfl.rr.com. Please fill out certificate holder information completely and accurately. Allow 24 to 48 hours for certificates to be processed.

Insured's Information (this is your contact information)

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Name:
Contact:
Phone Number:
Certificate Holder Information (Information needed is the name and complete address of entity requesting the certificate. We cannot name the park name, address or event date on the certificate. If the event is at a city or county owned park, we need the city or county information.) Name:
Address:
Fax or Email: Contact (if applicable):
Is the Certificate Holder requesting to be named as Additional Insured

YES / NO

(Additional Insureds added to the policy may incur additional charges) Unless it is a Florida state park, we <u>cannot</u> name a park as an additional insured.

If you supply us with a fax or email address of the certificate holder we will attempt to send one copy to them. We will email a copy to you for your files. It is your responsibility to verify with the certificate holder that they have received the certificate and if they have not, to send them a copy.