



32 Queen Street West, Brampton, Ontario, L6X 1A1

t. 905.459.6066

toll free: 1.877.422.8467

f. 905.459.6128

24 hour claims: 1.877.422.8123

CERTIFICATE OF INSURANCE REQUEST FORM

PLEASE COMPLETE & EMAIL OR FAX

Insured Name: _____ Date of Request: _____

Certificate Holder (legal name including Ltd, Corporation etc): _____

Certificate Holder Postal Address (including Postal Code):

Type of Certificate: Proof of Insurance Additional Insured

Reason for Certificate: _____

Activity being performed for Certificate Holder: _____

Location of job: _____

What product (if any): _____

Notice or cancellation requirements: No Notice 15 Days 30 Days Other Specify # of Days

Date Certificate Required By (date): _____

Certificate requested by (your name): _____ Phone # _____

IF YOU HAVE RECEIVED A WRITTEN REQUEST FOR PROVIDING A CERTIFICATE, PLEASE ATTACH

Proof of Insurance only: A Proof of Insurance certificate does not provide any protection to the Certificate Holder; it only verifies that insurance coverage exists at a certain time.

Additional Insured: Adding an Additional Insured to your policy allows the third party, typically a sub contractor, contractor, or other organization, to have your policy extend coverage to them so that they are protected for their "vicarious" liability arising from your operations on their behalf. As a business owner, you should limit your policy exposure by only allowing those who are absolutely required to be Additional Insured, to be added to your policy.