PLEASE MAKE COPIES FOR FUTURE REQUESTS

Alliance Insurance Agency of Arizona
General Liability & Auto Liability Certificate Request Form
Please Fax to 602 279 4916

CERTIFICATES ARE ISSUED WITHIN 1-2 BUSINESS DAYS UNLESS OTHERWISE NOTED AND DEPENDING ON WHETHER ANY ADDITIONAL APPROVALS ARE NEEDED FROM CARRIERS

Insured Information

TODAYS DATE:

YOUR BUSINESS NAME:

REQUESTED BY:

Certificate Holder Information

PERSON or ENTITY REQUIRING CERTIFICATE OTHER THAN INSURED

MAILING ADDRESS (required)

ATTN:

FAX CERTIFICATE TO ABOVE PERSON YES NO

FAX NUMBER: ( ) -

IF FAX NOT REQUESTED CERTICATE WILL BE MAILED

SPECIAL ENDORSEMENT

If you answer **"yes"** to any of the questions below, you **must** complete the job description section.

ADDITIONAL INSURED? YES NO (ADDITIONAL CHARGES MAY APPLY)

PRIMARY AND NON-CONTRIBUTORY COVERAGE?
YES NO (ADDITIONAL CHARGES MAY APPLY)

WAIVER OF SUBROGATION? YES NO (ADDITIONAL CHARGES MAY APPLY)

JOB DESCRIPTION:

JOB DURATION:

JOB CONTRACT DOLLAR AMOUNT: