

Request for Certificate of Insurance for Warren County

Email to Colin David at Arthur J Gallagher & Co

Colin_David@ajg.com

fax 914-323-4512/phone 914-697-6012

Name and address of Certificate Holder (who is requesting certificate): _____

Email or Fax for Cert Holder if required: _____

Phone # for Cert Holder if needed: _____

Contact Name for Cert Holder if needed: _____

Description of Job/Lease/Contract: _____
Line of coverage being requested: _____

Are the requesting Additional Insured Status? Y N

Are the requesting a Waiver of Subrogation? Y N

If yes to either of the above, please email or fax us a copy of the portion of the signed contract/agreement referencing insurance requirements. We require this prior to giving Additional Insured status on a certificate.

Contact Information for County Department requesting the certificate:

Name: _____
Dept: _____
Phone #: _____
Fax #: _____
Email: _____

Individual Departments should use this form only if the request is NOT part of a Contract.

Questions, contact Colin David at Arthur J Gallagher & Co at above contact information.