ALWAYS FAITHFUL INSURANCE AGENCY

Dr. George Rapciewicz Jr., Principal Broker
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California Certified Disabled Veteran Business Enterprise & Small Business #2045250

CERTIFICATE OF INSURANCE REQUEST

For current Always Faithful clients. Certificates are usually issued within one business day. Please attach the contract page that lists the insurance requirements so the wording matches what the certificate holder needs.

INSURED (YOU)

Business / Insured Name: _____ Policy # (if known): _____

Contact Name: _____ Phone: _____ Email: _____

Where should we send the certificate? ☐ Email me ☐ Email the holder ☐ Both

CERTIFICATE HOLDER

Holder Name: _____

Address: _____

City: _____ State: _____ ZIP: _____ Holder Email: _____

PROJECT / JOB

Project name or job address: _____

Contract or PO #: _____ Start date: _____ End date: _____

WHAT THE CONTRACT REQUIRES

Coverages to show:

☐ General liability ☐ Commercial auto ☐ Workers' compensation
☐ Umbrella / excess ☐ Equipment / inland marine ☐ Professional liability

Special wording requested (only what the contract requires and your policy allows):

☐ Additional insured ☐ Primary & noncontributory ☐ Waiver of subrogation
☐ 30-day notice of cancellation ☐ Per-project aggregate ☐ Completed operations AI

Additional insured name(s) exactly as required: _____

Description of operations / special wording from the contract:

We can only show coverage and endorsements your policy actually includes. If the contract asks for something your policy does not have, we will tell you and quote it.

APPLICANT SIGNATURE

Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

The undersigned requests that Always Faithful Insurance Agency issue a certificate of insurance as described above. A certificate is for information only; it does not change, extend or alter the coverage provided by the policies.

Printed Name: _____ Title (if business): _____

Signature: _____ Date: _____

Sign by typing your name in the signature box, signing with your PDF reader's Fill & Sign tool, or printing and signing by hand. Email the completed form to support@semperfiservicesolutions.com or call 650-489-2592.