



**CERTIFICATE OF INSURANCE REQUEST FORM**

To obtain a Certificate of Insurance, please complete the information below.  
**Your request can be faxed to (267) 757-7410, e-mailed to [certs@cauinsure.com](mailto:certs@cauinsure.com), or visit our website for processing at [www.cauinsure.com](http://www.cauinsure.com).**  
Requests are processed in a timely manner and mailed directly to the Mortgage Holder, unless forwarding instructions are provided below.

ASSOCIATION/COMPLEX NAME:

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UNIT OWNER/SHAREHOLDER:  
(as they appear on mortgage loan, including middle names or initials)

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COMPLETE UNIT ADDRESS:  
(street name, unit #, city, state and zip code)

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MORTGAGE LOAN NUMBER: \_\_\_\_\_

MORTGAGE/CERTIFICATE HOLDER:  
(as should appear on the Certificate of Insurance; including address)

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**Forwarding instructions:**

Company Name: \_\_\_\_\_

Attention: \_\_\_\_\_

Company Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**By providing CAU with a Fax Number and/or E-mail Address,  
you will be invoiced \$30.00 for expedited service.**

Fax Number: \_\_\_\_\_

E-Mail Number: \_\_\_\_\_