

REQUEST FOR CERTIFICATE OF INSURANCE

This request should be in the Property & Liability Risk Management Office one (1) week prior to the date we are to provide the certificate. Please email to orm-frm@virginia.edu, fax to 434-982-2635 or send to P.O. Box 400205. **Requests must be submitted by University employees only.**

Accompanying this request should be a copy of any contract or agreement between the outside organization and the University of Virginia. All contracts or agreements must go through the proper University contract review process before submitting a request for a certificate of insurance. If you are unsure of the process, please contact Debbie Hinton deh5m@virginia.edu or 434-924-6928.

Please provide the following information:

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| Person submitting request: | Phone: |
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Reason certificate of insurance is being requested:

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Activity or items to be covered by insurance:

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Name and address of organization asking for the certificate (NOT A UNIV DEPT):

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Period of time activity is to take place:

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Indicate to whom certificate should be emailed, mailed, or faxed:

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