

Evidence of Insurance requested as

Certificate of Insurance or  Evidence of Coverage (check one)

**Legal Name and address of person/entity requesting a Certificate of Insurance:**

\_\_\_\_\_

Address of Entity:

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Street City State Zip

If requested to be included on the certificate of insurance or proof of coverage please check.

Additional Insurance Required

Loss payee (only applicable for property rentals or leases)

Waiver of Subrogation (usually only applicable when there is a contract involved)

- If requested please include a copy of the contract.

**Reason for Certificate of Insurance or Evidence of Coverage (check one - see bullet for additional required information, if any) :**

Temporary use of a third parties facilities or land (usually for an event or film/video shoot)

Purchase or lease of new Vehicle/Automobile for University business

- Attach documentation containing VIN and cost of vehicle/automobile.

Rental of equipment or property

- Attach list of equipment/property with cost to replace

Short term lease of equipment or property (less than one year)

- Attach list of equipment/property with cost to replace

Long term lease of equipment or property (more than one year)

- Attach list of equipment/property with cost to replace

If a project name has been established for this, please provide the name of the project (i.e. Winterfest 2017, March LU Recruiting at Such-n-Such Conference):

\_\_\_\_\_

**Dates of Event, Rental, or Use** \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_.

**Name of person submitting this form to the Office of Risk Management:**

\_\_\_\_\_

Name Indicate if Student, Faculty or Staff Department