

# McQUISTON INSURANCE AGENCY

31 Plank Avenue | P.O. Box 436 | Paoli, PA 19301  
(610) 644-5100 | (610) 644-3089 (Fax)

## Certificate of Insurance Requirements

In order to process your request for a Certificate of Insurance, the following information is required:

Insured's Name:

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Insured's Phone and Fax Number:

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Certificate Holder's Name:

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Certificate Holder's Address, Phone, and Fax Number:

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Please list each additional insured's name, address, phone and fax number, and relationship to job in progress. *Please note that many of our companies charge a fee to add additional insureds as they are extending full coverage under your policy to a separate entity.*

Additional Insured #1 Name:

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Address, Phone and Fax Number:

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Relationship to Job in Progress:

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Additional Insured #2 Name:

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Address, Phone and Fax Number:

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Relationship to Job in Progress:

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Additional Insured #3 Name:

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Address, Phone and Fax Number:

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Relationship to Job in Progress:

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Description of work to be done:

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Please fax this form or email a copy to:

(610) 644-3089 (Fax) or [jeff@mcquistoninsurance.com](mailto:jeff@mcquistoninsurance.com)

**IMPORTANT NOTE:**

The Certificate is an ISO approved form used as a legal document to show proof of insurance on the date of issue. If your insurance were to cancel, we as agent and issuer are legally required to notify the additional insured certificate holder of the cancellation. We do not retain prior certificates in your active file. Therefore, we will need the requested information each time you request a certificate. Additional insureds added to your policy are given certain rights including, but not limited to, filing claims, prior notice of cancellation, and canceling the policy. The company may require an additional premium to add an additional insured. The company may also deny your request to add an additional insured. We will attempt to fax certificates within 24 hours of the day we receive this completed form.