



Operational Risk Management
 4400 University Drive, MSN 6D6,
 Fairfax, VA 22030 Phone: 703-993-2599

REQUEST FOR CERTIFICATE OF INSURANCE

Certificate request must be submitted **one week** before the date of the event. Requests must be **SUBMITTED BY MASON EMPLOYEES ONLY**. In order for Risk Management to provide Certificates of Insurance for Mason activities, the following information is required:

MASON GROUP/DEPARTMENT CONTACT INFORMATION:

Name:
 Department:
 MSN # Email:
 Phone: Fax:

WHO HAS REQUESTED THE PROOF OF INSURANCE?

Company Name:
 Contact Name:
 Street Address:
 City, State, Zip:
 Phone #: Fax#:

DATE ACTIVITY, EVENT, INTERNSHIP, OR LEASE IS OCCURRING:

Start Date: End Date:

Contact Email:

IDENTIFY WHAT THE CONTRACT IS FOR:

(Please include any contracts or agreements that pertain to this request):

Activity	Event	Internship	Lease Agreement
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PROVIDE DESCRIPTION OF THE ACITIVITY, EVENT, INTERNSHIP, OR LEASE TO INCLUDE CONTRACT/ AGREEMENT TITLE OR NUMBER:

WHERE IS THE ACTIVITY/EVENT BEING HELD?

Facility Name:

Street Address:

City, State, Zip:

WHERE IS THE CERTIFICATE TO BE SENT?

Send COI to Mason Department via:	Fax	Mail	Email
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Send COI to Requester via:	Fax	Mail	Email
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Please email this form to risk@gmu.edu