



Community Association Underwriters of America, Inc.

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, or visit our website for processing at www.cauinsure.com.
Requests are processed in a timely manner and mailed directly to the Mortgage Holder, unless forwarding instructions are provided below.

UNIT OWNER REQUEST – PLEASE DO NOT INVOICE

ASSOCIATION/COMPLEX NAME _____

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

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

MORTGAGE LOAN NUMBER: _____

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

Forwarding instructions:

Company Name: _____ Attn: _____

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 Address: _____