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**Request Form for Certificate of Insurance**

To obtain a Certificate of Insurance, please complete this form and e-mail or fax to:

[bgershon@pwains.com](mailto:bgershon@pwains.com), fax # 973-863-7519

Requests will be processed within 24 hours and mailed directly to the Mortgage Holder. A copy will also be sent to the initial e-mail address if requested.

Association Name: \_\_\_\_\_

Unit Owner: (exactly as it appears on the mortgage loan) \_\_\_\_\_

Loan # \_\_\_\_\_ (if applicable)

Complete Unit Address: (include unit number, street name, city, state, zip)

\_\_\_\_\_

Mortgage/Certificate Holder/Loan # and their address exactly as it needs to appear on certificate:

\_\_\_\_\_

\_\_\_\_\_

Forwarding Instructions:

Company Name: \_\_\_\_\_

Attention: \_\_\_\_\_

Company Address: \_\_\_\_\_

Phone Number/Fax Number/E-Mail Address:

\_\_\_\_\_

Would you like us to e-mail a copy to the Unit Owner? (Please circle)      YES      NO

If so, please provide email address: \_\_\_\_\_