

Request for Certificate of Insurance (COI)

If this is for an event, please send your request at least 10 business days prior to the event.

Send to: Katrina Brandner – katrina.brandner@aon.com (920-431-6241)

Contact Person(s) at the Parish/ School: _____

Phone Number(s): _____

Email(s): _____

Parish / School (Name): _____

Parish Ledger Page Number: _____

Reason for Requesting the Certificate of Insurance:

Location of Event:

Event Date: _____

Lease of Equipment Lease #: _____

Rental of Pavilion/Building/Ball Field etc. Date(s) of rental: _____

Other: _____

Certificate Holder (Who is Requesting the Certificate of Insurance)

Name of Company: _____

Attn: _____

Address: _____

Phone: _____

Attach any Written Request or Contract Documents that you have received for Insurance Review.
Please include any signed contract(s).

Liability COI Loss Payee (Contract or written agreement required)

Auto COI Additional Insured (Contract or written agreement required)

Property COI Mortgagee (Contract or written agreement required)

Workers Compensation Other _____