|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Certificate of Insurance Requests \*\*Please allow for 24 hour turnaround\*\***  SSBC COI Requests  must be submitted to  Sadie Brown, brown@aisc.org | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Attn:** Greyling Insurance Brokerage  3780 Mansell Road, Suite 370, Alpharetta, GA 30022  [katie.kresner@greyling.com](mailto:katie.kresner@greyling.com)  p (770) 552-4225 f (866) 550-4082 | | | | | | | | **From:** American Institute of Steel Construction  130 E. Randolph Street  Suite 2000  Chicago, IL  60601 | | | | |
| **Please Fill in Gray Areas** | | | | | | | | | | | | |
| **Today’s Date** | |  | | **Named Insured** | |  | | | | |
| **Your name** | |  | | | | | | | | | | |
| **Certificate holder [company name]** | |  | | | | | | | | | | |
| **Address**  **City/State/Zip** | |  | | | | | | | | | | |
| **Project Reference** | |  | | | | | | | | | | |
| **Policies to be referenced in certificate and requested policy limits** | | **Coverage** | | **Specific limit to show** | | | | | | **Other requirements? Please check one** | | |
| General liability | | $1M occurrence  $2M aggregate | | | | | | | Additional insured? Y  N  Waiver of subrogation? Y  N  Primary NonContributory Y  N | |
| Business auto | | $1M single combined | | | | | | | Additional insured? Y  N  Waiver of subrogation? Y  N  Primary NonContributory Y  N | |
| Workers’ compensation | | Statutory limits  $1M each accident | | | | | | | Waiver of subrogation? Y  N  Primary NonContributory Y  N | |
| Umbrella liability | | $5M occurrence  $5M aggregate | | | | | | | Additional insured? Y  N  Waiver of subrogation? Y  N  Primary NonContributory Y  N | |
| Professional Liability | | $1M per claim  $2M aggregate | | | | | | | Additional insured? Y  N  Waiver of subrogation? Y  N  Primary NonContributory Y  N | |
|
| **Cancellation notice** | | *Check One:* 1) 30 days  2) Not applicable | | | | | | | | | | |
| **How would you like this certificate sent:** | | | | **To You** | | | | **To the Certificate Holder** | | | | |
| Fax | |  | | | |  | | | | |
| Regular mail | |  | | | |  | | | | |
| Overnight mail | |  | | | |  | | | | |
| E-mail (as a PDF file) | | |  | | |  | | | | |