

SafeChurch® Certificate of Insurance Request

It is a policy of this church to require all contractors, service companies and outside groups using the church facilities to provide proof of general liability and workers' compensation insurance.

The appropriate form should be attached to this sheet, prior to any work or event occurring, naming this church as an additional insured.

Name of contractor/organization:		
Address:		
ontact person: Title:		
Phone number:		
Description of activity/job/event:		
Approximately how many people will be involved in the activity/job/ev	ent?	
What types of activities will be included in this event (e.g., dancing, copower tools, meetings, etc.)?		
Amount of coverage: Name of insurer:		
Phone number of insurer: Policy ex	piration date:	
Limits of Liability:		
Do you have an umbrella policy?	☐ Yes	□ No
Are all workers included under your workers' compensation policy?	☐ Yes	□ No
Is our church/organization named as an "additional insured"?	☐ Yes	□ No
Signature:	Date:	
For church use:		
I have looked at the attached paperwork and have approved the above use the church facility for the purpose described above.	ve named ag	ency/group/business to
Name: Da	ate:	
Title:		



(08.06)