

## Request for Certificate of Insurance

**Auburn University Risk Management & Safety**  
1161 W Samford Ave RMS Building 9, Auburn University, AL  
36849-5104 Phone: (334)844-4533 Fax: (334)844-4942

---

**Instructions** - Click the Email button at the top of the page. This will attach the form to an email. Please send the email with form attached to [aurmi@auburn.edu](mailto:aurmi@auburn.edu). Please make sure that you are providing *complete information*. The certificate will be sent to: (1) AU Risk Management, (2) AU department contact, and (3) the entity requesting the certificate. This form must be completed *in its entirety* or it will be returned to the AU department. Certificates can be faxed but the preferred option is email. If prompted as to how to send the document, please select "Send Copy" then "OK."

---

**Auburn University Department Requesting Certificate of Insurance:**  
*(A complete mailing address, phone, fax and email address must be furnished)*

AU Department Requesting Certificate of Insurance: \_\_\_\_\_  
AU Department Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Email Address for AU Department Contact: \_\_\_\_\_

Describe the activity to take place: \_\_\_\_\_

AU Department's relationship to the entity that is requesting the Certificate of Insurance:

---

Requesting a Certificate of Insurance for which insurance coverage?: (Check all that apply)

- Automobile Physical Damage:
- Automobile Liability:
- General Liability:
- Professional Liability:
- Property Insurance:
- Student Professional Liability:
- On the Job Injury Program:
- Other:

If "other", please explain:

---

**Entity Requesting a Copy of Auburn University's Certificate of Insurance:**  
*(A complete mailing address, phone, fax and email address must be furnished)*

Contact's Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Email address for Entity's Contact: \_\_\_\_\_

**Note - As a State Institution, Auburn University cannot agree to add outside entities as Additional Insureds on our General Liability policy, or agree to indemnify them.**  
**Please retain a copy of the certificate in your files.**