

# CLIC Certificate Request

Question: Call Tyler Mackenzie at (630) 694-5165

<b>Fax</b>	Tyler Mackenzie
<b>or</b>	Fax# (630) 285-4062
<b>E-mail:</b>	tyler_mackenzie@ajg.com

Request Date: \_\_\_\_\_ Requested by: \_\_\_\_\_

Certificates will be issued within 24 hours of received date  
District Name & #: \_\_\_\_\_

**District** E-mail addresses of any district personnel to receive a copy: \_\_\_\_\_

Name & Address of Certificate Holder:	_____
	_____
	_____
Fax or E-mail address of Certificate Holder to send direct:	_____
(Either a Fax or E-mail address is required to issue the certificate directly)	
Certificate Purpose:	<input type="checkbox"/> Use of Facilities (ex. Field trip or event at a non-district location) - Please list specific info to the use of facilities as indicated below
	<input type="checkbox"/> Student Work Program
	<input type="checkbox"/> Equipment Lease/Finance (include amount of leased/financed equipment)
	<input type="checkbox"/> Vehicle Lease/Finance (include VIN's of leased/financed vehicles & total amount)
	<input type="checkbox"/> Bus Licensing with Secretary of State (include VIN's of buses being licensed)
	<input type="checkbox"/> Other - Business Relationship with Entity requiring Certificate:
	_____
If this is for an event, please state type of event, location, and date. This space can also be used for equipment or vehicle information as referenced above.	
	_____

Should this certificate be issued again at policy renewal (July 1<sup>st</sup>)? Yes  No

If Specific Info provided by Certificate Requestor:

Additional Insured Requested (applies to Liability only) Yes  No

Loss Payee Requested (applies to Property only) Yes  No