



REQUEST FOR CERTIFICATE OF INSURANCE

In order to obtain a certificate of insurance, this form needs to be completed by an authorized Cleveland State University representative.

Is there an agreement or contract that requires a certificate of insurance? _____ Yes _____ No

If there is a contract or agreement, please forward a email copy to Robert Howerton.

Location of activity: _____

Certificate Date(s): _____

Activity Description: _____

Organization requesting certificate of insurance:

Name: _____

Address: _____

City/State/Zip: _____

Contact Person: _____

Phone/Email: _____

Fax Number: _____

Email completed request to:

Robert Howerton
Cleveland State University
Environmental Health and Safety
r.howerton@csuohio.edu
216-687-3715