



REQUEST FOR CERTIFICATE OF INSURANCE

REQUESTING STATE AGENCY: Northern Arizona University (416)
Purchasing – Insurance and Claims Services
PO Box 4067
Flagstaff, AZ 86011
Phone: (928) 523-4557

The NAU Department Representative listed below will receive a copy of certificate issued by State Risk Management. Please complete the following information and attach a “copy” of the signed contract or agreement. Mail the request form and copy of contract or agreement to NAU Insurance and Claims Services, Box 4067; NAU-Insurance@nau.edu; or fax to (928) 523-1343.

INDICATE COVERAGE(S) REQUESTED BY CERTIFICATE HOLDER (OUTSIDE AGENCY):

COVERAGE	EFFECTIVE DATE	EXPIRATION DATE	LIMITS OF COVERAGE
COMMERCIAL GENERAL LIABILITY			\$
COMMERCIAL AUTO LIABILITY			\$
WORKERS’ COMPENSATION			\$
PROFESSIONAL LIABILITY			\$
ALL RISK REAL PROPERTY: REPLACEMENT COST			\$
ALL RISK PERSONAL PROPERTY: ACTUAL CASH VALUE			\$
OTHER			\$

DESCRIPTION OF EVENT/PROPERTY/CONTRACT: _____

LOCATION: _____

ISSUE TO: CERTIFICATE HOLDER: _____

Name of Outside Agency Requesting Certificate: This is not the NAU Department

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

ATTENTION: _____ **FAX NUMBER:** _____

CERTIFICATE TO BE SENT DIRECTLY TO:

___ Certificate Holder (Outside Agency) ___ NAU Insurance and Claims ___ Other (Please Specify) _____

Please Print: _____

Name of NAU Department Representative

_____ Date

_____ Department

_____ Box #

_____ Phone #

Return request form to:
NAU Purchasing – Insurance and Claims Services
PO Box 4067, Flagstaff, AZ 86011
Phone: 928-523-4557 Fax: 928-523-1343

Return request form 10 working days prior to effective date of certificate

INSTRUCTIONS

1. Please submit all of the following documentation (at least 10 working days before the certificates effective date) to NAU Insurance and Claims Services, PO Box 4067; NAU-insurance@nau.edu; or fax to (928) 523-1343.

CERTIFICATE OF INSURANCE REQUEST FORM: Complete Entire Form

COPY OF AGREEMENT/CONTRACTS: attach a copy of the signed agreement/contract, including addendums.

- Do not submit an agreement or contract if it has not been reviewed and signed by the NAU Contract Administrator. Contact Purchasing, (928) 523-4557.
- Authorized NAU Contract Administrators are the only employees authorized to sign contracts and agreements on behalf of NAU and the Arizona Board of Regents.
(http://www4.nau.edu/comptr/cms_pdfs/Signature%20Authority.pdf)
- Do not send the original contract/agreement to Insurance and Claims Services. The original agreement/contract should be sent to the requesting outside agency or certificate holder. A copy of the agreement/contract should be sent to Insurance and Claims Services.
- If an agreement or contract does not exist, the requesting outside agency must send NAU a letter outlining their insurance requirements. State Risk Management will not issue a Certificate of Insurance without a signed contract, agreement, or letter.
- Insurance and Claims Services will submit the above documents to State Risk Management Section, requesting a certificate be issued to the requesting outside agency identified on the form under Certificate Holder.

2. **DO NOT SUBMIT**

An agreement that grants indemnification/hold harmless to the certificate holder, and/or a third-party requirement for the State to name the third party as additional insured

If such provisions exist, the States Risk Management insurance analyst will require NAU to amend or strike such language prior to approving and issuing a certificate to the third party requiring certification.

The Attorney General's Office has opined that State departments, agencies, boards and commissions cannot legally enter into a contract in which the State agrees to indemnify and hold harmless the other party. Therefore, State Risk Management Section cannot issue a Certificate of Insurance required by an invalid contract.

4. The Certificate to be issued will be a matter of information only and confers no rights upon the Certificate Holder. It neither affirmatively nor negatively amends, extends, nor alters the coverage afforded by the Arizona Revised Statutes.
5. If you have any questions concerning this form or certificate process, please contact Purchasing Services, Insurance and Claims Services, at (928) 523-4557 or NAU-insurance@nau.edu.

Return completed request form and copy of signed contract/agreement to:

Northern Arizona University
Insurance and Claims Services
PO Box 4067
Flagstaff, AZ 86011
(928) 523-1343 fax