



3100 S Federal Highway, Suite G
 Delray Beach, FL 33483
 (561) 278-6066 Tel
 (561) 278-1387 Fax

THE BRIDGES HOMEOWNERS ASSOCIATION

REQUEST FOR CERTIFICATE / EVIDENCE OF INSURANCE

Date of Request:

| | |
|------------------------------------|---|
| Type of request, please check one: | Certificate of Liability Insurance <input type="checkbox"/> |
| | Evidence of Property Insurance <input type="checkbox"/> |
| | Both <input type="checkbox"/> |

Name of Unit Owner:

Unit Owner Phone#:

Unit Address:

Mortgage/Loan#:

| | | | |
|-------------------|--------------------------------|--------------------------------|--------------------------------------|
| Mortgagee Clause: | Name of Lender: | <input type="text"/> | |
| | ISAOA <input type="checkbox"/> | ATIMA <input type="checkbox"/> | ISAOA/ATIMA <input type="checkbox"/> |
| | Address: | <input type="text"/> | |
| | Phone: | <input type="text"/> | |
| | Fax: | <input type="text"/> | |
| | Email: | <input type="text"/> | |

Please attach copy of the request letter from your lender and email or fax along with this form to:

Robert Posillico
 (561) 278-1387 Fax
 robposillico@sciroccogroup.com