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Insured's Name:	Address:
Certificate Holder Name:	Address:

Who the certificate is being sent to:

Please put email here:

Type of Insurance Certificate

Automotive: ☐ Personal: ☐

General Liability: ☐ Property: ☐

(Optional)

Finance Company Name:	Address:

If you require a vehicle certificate, then please provide the following: Make, Year & VIN in below Section:

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