

INSURANCE CERTIFICATE ORDERING INSTRUCTIONS- 2003

In order to facilitate prompt response when ordering insurance certificates; please follow the steps outlined below. Please allow **30 (thirty)** days for completion of your request. Always include your legal name and daytime phone number.

HOW TO: USE A SEPARATE SHEET OF PAPER FOR REQUIRED INFORMATION & THE FORMAT LISTED BELOW ONLY.

1. Name & Physical address of the site.
2. Beginning and ending dates & times of the event. For multiple dates, please list out all the dates.
3. Certificate Holder's Name & Address – (This is not your local group – it is the Church, Park's Dept., etc. who is requesting that they be furnished a certificate).
4. Additional Insured – The exact wording that the Certificate Holder Wishes to appear on the certificate. They will provide you with the wording.
5. Fax Number (if applicable)
6. Routing Name for Fax (if applicable)
7. Event Coordinator: Name & Daytime Phone Number

ORDERING FEES:

General Liability Policy & International Policy:

If there is to be named "additional insured," the fee is \$50.00. If "additional insured" is not requested, the certificate is free. ***FEE MUST BE RECEIVED WITH REQUEST. PROCESSING WILL NOT BEGIN UNTIL FEE HAS BEEN RECEIVED.***

Equestrian Policy:

Each time the Equestrian Policy is activated the fee is \$50.00. If you need "additional insured," it is another \$50.00. For activation of both the Equestrian Policy and "additional insured" the total would be \$100.00. ***FEE MUST BE RECEIVED WITH REQUEST. PROCESSING WILL NOT BEGIN UNTIL FEE HAS BEEN RECEIVED.***

Late Fee:

If the **30 (thirty)** day ordering period is not adhered to, there will be a **\$100.00** late ordering fee charged. Occasionally, the site will delay requesting a certificate and the fee may be waived by providing the Corporate Office with a letter from the site owner (on letterhead) detailing the cause of the delay. However, the late fee will need to be paid

with the certificate fee, and will be refunded after the Site Owner's letter has been reviewed.

Please send payment, made out to the SCA, Inc., to P.O. Box 360789, Milpitas, CA 95036-0789

We will also accept payment via email & fax. Please send your request & payment (Visa/MC only) to: Patricia@sca.org or fax to 408-263-0641.