

Harbour Woods Association

Certificate of Insurance Transmittal Form

Insurance Agent Information

Policy Holder Information

To:	Insured:
Email Address:	Policy:
Contact Name:	Phone:

From: Harbour Woods Association, Stratford, CT
Subject: Request for Certificate of Insurance
RE: Slip owners/renters Marine Certificate of Insurance

ACTION: PLEASE Email OR FAX THIS FORM TO YOUR INSURANCE AGENT (COMPANY)

Please find below insurance certificate information. Certificates are required **prior** to occupying any slip at Harbour Woods Marina. See below for specific required information.

Insurance Coverage Minimum Requirements: 1.) Liability: **\$300,000 minimum**

Certificate #1: Primary Certificate of Insurance:
HarbourWoods Association
Stratford, CT 06615

Certificate #2: *Slip Owner if owner is renting the slip*

- ◇ **Slip Owner:** _____
- ◇ **Address:** _____
- ◇ **City, State, Zip** _____

Important*****A certificate of insurance is a document used to provide information on specific insurance coverage. The certificate provides verification of the insurance and usually contains information on types and limits of coverage, insurance company, **policy number**, named insured, and the policies' effective periods.

Please Email certificate to HWDockMaster@Yahoo.com or Fax to: 203-882-1794 or Mail to: Steve Berube, 114 Milford Point Rd, Milford, CT 06460

Steve Berube Dock Master, HarbourWoods Association, Stratford, CT. 06615
Phone: (203) 675-5184