

If you are an insured and need certificates of your insurance mailed to a Certificate Holder, please fill out the form below and email it to us at: <a href="mailto:certs@riceinsurance.com">certs@riceinsurance.com</a>. In an effort to better protect you, our insureds, please submit any requests for Certificates of Insurance before the work commences. If you have any questions, please do not hesitate to contact us at: 1.888.742.3467.

**Contact Information** 

Mailing Address.	2200 Rimland Drive, Ste 305 Bellingham, WA 98226							
Contact:	certs@riceinsurance.com P: 360.734.1161 F: 360.734.1173							
Certificate(s) Reques	sted By							
Your Company Name:								
Your Name:	Your Email:							
Issue Certificate To (please fill out all fields)								
Certificate Holder:								
Individual/Attention To:								
Would you like the Certificate: Emailed (preferred) Mailed Faxed					Faxed			
Please fill out the <i>email</i> or <i>fax</i> number if you would like it sent other than by mail:								
Mailing Address:								
City:		Stat	State:		Zip Code:			
Type of Coverage you Need Sent:								
Does the Certificate Holder need to be listed as Additional Insured?  Yes No  If Yes, please specify for which insurance:								
Additional Comment	s:							



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Certificate Holder:									
Individual/Attention To:									
Would you like the Certificate:	Emailed (preferred)	Mailed Faxed							
Please fill out the <i>email</i> or <i>fax</i> number if you would like it sent other than by mail:									
Mailing Address:									
City:	State:	Zip Code:							
Type of Coverage you Need Sent:									
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City:	State:	Zip Code:							
Type of Coverage you Need Sent:									
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Additional Comments:									