

**Instructions to request Certificate of Insurance if needed for yourself, a Bank or Financial Institution, or other recipient.**

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Step 1 Enter the below URL to open the request form webpage (form looks like the screen prints below). If this URL doesn't open properly, try getting there using Steps 2 and 3.

**[https://vbjscftotn.formstack.com/forms/condo\\_coi\\_request\\_form](https://vbjscftotn.formstack.com/forms/condo_coi_request_form)**

Alternatively:

Step 2 Enter the below URL to reach the webpage with blue box as shown below.

**<https://www.marshmma.com/us/industries/association.html>**

Step 3 On the webpage, click on the blue box to open the request form

**Request for Certificate of Insurance**

Complete the form information to request a Certificate of Insurance (COI) for the Unit Owner, a Bank or Financial Institution or other recipient.

**[Request a COI](#)**

The below webpage will open with the fill in the blank request form

**[https://vbjscftotn.formstack.com/forms/condo\\_coi\\_request\\_form](https://vbjscftotn.formstack.com/forms/condo_coi_request_form)**

**Attached screen prints tell you exactly what information you will need to complete the form.**

Complete the information below to request a Certificate of Insurance (COI) for the Unit Owner, a Bank or Financial Institution or other recipient.

Include an email or fax for each recipient for delivery of the current certificate as well as annual renewals if needed.

Association Name: Marsh Ridge Homeowners Association



## Request for Certificate of Insurance

Complete the information below to request a Certificate of Insurance (COI) for the Unit Owner, a Bank or Financial Institution or other recipient. Include an email or fax for each recipient for delivery of the current certificate as well as annual renewals if needed.

Association Name \*

## Unit Information

Address (including unit #) \*

Address Line 1

Address Line 2

  

Unit Owner Name \*

First Name

Last Name

Mortgage Loan Number \*

Enter "NA" if none

## Bank or Financial Institution

Name \*

Enter "For Information Only" if no Bank or Institution Name

Address

Address Line 1

Address Line 2

City

State

ZIP Code

## Delivery

Issue one-time only, or annual renewals?

- One-time only  
 Annual Renewals

Recipient 1 - Name of Bank or Financial Institution \*

Enter "NA" if none

Recipient 1 - Email/Fax \*

Enter "NA" if none

Recipient 2 - Unit Owner \*

Recipient 2 - Email \*

Recipient 3 - Name

Recipient 3 - Email/Fax

Additional Instructions (if any):

Submit Form