**HOW DO I REQUEST A CERTIFICATE OF INSURANCE?**

The Certificate of Insurance Form is located in the HR/Risk Management page.

[Human Resources Division](https://www.sjgov.org/department/hr/divisions/risk-management/forms)

You may also request the form by email to sjcriskmgmt@sjgov.org.

**MAY I REQUEST A CERTIFICATE WITHOUT THE FORM?**

To ensure the certificate is correct, the appropriate information and requirements are needed. It is important to complete the entire Certificate Request Form. Not completing the request form may cause delays.

**HOW DO I SUBMIT THE CERTIFICATE REQUEST?**

You may submit the form by email to sjcriskmgmt@sjgov.org.

**HOW LONG DOES IT TAKE TO GET A CERTIFICATE?**

Please allow 10-14 days for a certificate to be generated.

**WHAT IF I HAVE QUESTIONS?**

You may contact Mignon Supnet or Nancy Brooks

msupnet@sjgov.org – 209-468-9969

nbrooks@sjgov.org – 209-468-3376

**HOW DO I COMPLETE THE FORM?**

**Name of event** could be the actual name of event, or the grant/agreement/etc.

**Date of event** is the date of the event, including set-up and breakdown dates if different.

If this is for a grant/agreement/lease, please note the certificate can only be issued for one fiscal year at a time due to policy dates.

**Times** is the time span of the event, including set-up and breakdown times.

**Location of event** is the actual location where the event will be held, for example Victory Park.

**Specific building, booth, etc** is for specific buildings, rooms, parking lot, booth, etc, that will be used.

**Is this for a grant/agreement:** Please note if this request is for a grant/agreement/lease and not an event. A Certificate Letter may be issued.

**Grant/Agreement/Lease Number**; please include the document with the request form.

**Outside Agency** refers to the agency requesting the certificate from the County. Please include their insurance requirements.

**Outside Agency address** refers to the address the Agency wants on the certificate. Risk Management does not submit the certificate to the requesting agency. The address will be included on the certificate, but it is the department’s responsibility to submit the certificate to appropriate agency.

**SJC Department/contact person** – **REQUIRED**. Forms will be printed for processing. All information should be on the form. Due to the volume of incoming requests, prior emails may not be referenced.