CERTIFICATES/ENDORSEMENTS PROCESSING INSTRUCTION SHEET

То:	Sent Date:	Time:
From:	Required Date: (other than standard turnaround)	Time:
Insured:	Completed Date:	Time:
Client Code:		mile.
☐ Effective date:☐ Issue Certificate(s) (Next Day)☐ Issue Renewal Certificate(s) (3 Days)	☐ Issue ID card(s) (Next Day)☐ Issue Renewal ID card(s) (3 Days)	
Coverage: GL Auto Umb WC Prop Inl Mar Garage Other: Proof Only		
Special Conditions: ☐ Standard Wording ☐ Special Wording (Approval - See attached) ☐ Request Endorsement (Diary 45 Days):		
☐ Request to Add Additional Insured to: ☐ GL ☐ Auto Al ☐ Garage ☐ Other:		
Interest: Form #, Edition Date, Title:		
 □ Blanket/Automatic Additional Insured: □ GL □ Auto Al □ Garage □ Other: □ Includes 1) those required by the contract to be an A/I and 2) those not a party to the contract □ Those that are a party to the contract: □ Request endorsement to add those not party to the contract: <u>Interest:</u> Form #, Edition Date, Title: 		
☐ Request Waiver of Subrogation: ☐ GL ☐ WC ☐ Auto ☐ Umb		
☐ Blanket Waiver of Subrogation: ☐ GL ☐ WC ☐ Auto ☐ Umb		
☐ Request or ☐ Blanket: Primary Non-Contributory – Form #, Edition Date, Title:		
Gen Liab - Gen Aggregate applies per: ☐ Policy ☐ Project ☐ Location		
☑ Mandatory: At New or Renewal, if Surplus Lines Stamp Required – AM to prompt <u>Atlas Page 1</u> Sagitta Basic Policy Special Instructions:		
Special Mailing Instructions: (only if other than normal)		
☐ Fax Copy (before mailing) to Fax #:☐ Mail Out	☐ Email to: ☐ Other:	
Approval Only – Use ACORD 25 (2009/01):		
☐ Cancellation Days: Issuance of Notice of Cancellation (NOC) to ☐ Insurance Company approved (name ☐ Insurance Company rejected, Atlas a	and date): pproved (name and date):	Cancellation Clause
 □ Who issues NOCs To Als? Enter Policy Note in Sagitta □ Insurance Company Issues NOCs to Als □ Atlas must issue NOCs to Als, Atlas approved (name and date): 		
Other Comments:		

07-26-2011