



## INSURANCE REQUIREMENTS

Please provide a Certificate of insurance with the following information:

**PLEASE EMAIL ALWAYS:** [admin@thecollinscondo.net](mailto:admin@thecollinscondo.net)

In your message, subject line please indicate the Unit Number you are working for. Also, please state the date and time frame reservation to be confirmed.

**CERTIFICATE HOLDER and ADDITIONAL INSURED must be EXACTLY as shown below:**

- **Additional Insured / Certificate Holder:**  
The Collins Condominium Association, Inc.  
6917 Collins Avenue  
Miami Beach, FL 33141
- **Required Coverage:**
  - General Liability: **\$1,000,000.00 (Minimum)**
  - Worker 's Compensation: **(REQUIRED)** \*or provide proof of **EXEMPTION** - (no exceptions)

**Please note: Without the Certificate of Liability Insurance AND Workers Compensation, no moves or deliveries will be allowed to proceed.**

1. The "certificate holder" must list the Legal Names of the Condominium Association; otherwise it will not be allowed in the property.
2. Certificates **MUST** be done exactly as specified in the instructions. Changing even **ONE** word will cause them to get rejected and reservation cancelled. \*Do not make any changes!

If you have any questions, please feel free to contact us immediately.

Thank you,

The Collins Condominium Association, Inc.  
[admin@thecollinscondo.net](mailto:admin@thecollinscondo.net)