

## UAW Local 551

13550 S. TORRENCE AVE. CHICAGO, IL 60633 Office (773) 646-1472 | Fax (773) 646-5859 www.uawlocal551.com



## **Insurance Confirmation Request**

## **UAW Local 551**

13550 S. Torrence Ave Chicago, II 60633 Phone (773) 646-1472 Fax (773) 646-5859

Our customer has a Homeowner's Policy with you. This form provides information from you about their policy. Please, fill in all the blanks and fax it to our office.

about their policy. I lease, fill in all the blanks and lax it to our office.
(Please Print) Policy Number:
Policy Liability Amount:\$
Policy Effective Dates-From: To:
Does this policy have a written exclusion for host liquor liability?
* Select one: Yes No
*Host Liquor Liability Coverage: Liquor/Alcohol is supplied and controlled by your Insured at NO COST to recipient, and Liquor/Alcohol will not be mixed by your Insured This coverage is strictly for the Insured and their guests.
Policy Holder(s) full name:
Policy Holder(s) signature:
Policy Holder(s) address:
Number of Guests Expected:
Date and time of rental:
The location of the gathering is to be the same as on the letterhead.
Insurance Company's Name:
Address:
Phone:
Agent's Name:
Address:
Phone:

Agent's Signature:	Date:	

- After this information has been filled in, please feel free to make yourself a copy, then email the completed copy to info@uawlocal551.com.
- > The original copy should be delivered in person to Financial Secretary at the above hall address.