

CONDOMINIUMS

REQUEST FOR PROOF OF INSURANCE

Name of Condominium:

Bayside Condominiums Association of Brevard, Inc.

Condo Address _____

Unit Owner Name _____

Unit Owner Address _____

Building or Unit # _____

Mortgagee Clause _____

Loan # _____

Lender/Mortgagee Phone Number _____

Lender/Mortgagee Fax Number _____

Lender/Mortgagee Email Address _____

Unit Owner Phone Number _____

Unit Owner Fax Number _____

Unit Owner Email Address _____

(Complete unit owner phone/fax/email if you would like a copy of the certificate sent to you as well as to the lender/mortgagee)

**Fax request to: 321-757-8687 Attn. Karen Sumner, Brown & Brown Insurance
Phone: 321-757-8686 Ext. 128**