NEXUS

NEXUS INDUSTRIAL GROUP, LLC
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CERTIFICATE OF INSURANCE REQUEST.

CUSTOMER REQUEST FOR COI

FORM	DATE REQUESTED	DATE NEEDED BY
NXS-COI-01 · Rev A		

Customers and project owners use this form to request a certificate of insurance (COI) from Nexus Industrial Group. List the certificate holder exactly as it should appear and attach the insurance requirements from your contract, purchase order, or site rules. Nexus forwards the request to its insurance broker. Standard certificates are usually issued within three (3) business days.

01
SECTION

REQUESTED BY

COMPANY NAME	
CONTACT NAME	
TITLE	
PHONE	
EMAIL	

02
SECTION

CERTIFICATE HOLDER

Exactly as it should appear on the certificate.

LEGAL NAME	
STREET ADDRESS	

CITY · STATE · ZIP	

03 SECTION — PROJECT OR CONTRACT

PROJECT NAME	
PROJECT / SITE ADDRESS	
CONTRACT, PO, OR SOW NO.	
PROJECT DATES	

04 SECTION — COVERAGE REQUESTED

COVERAGES	☐ Commercial general liability ☐ Products and completed operations ☐ Automobile liability ☐ Workers' compensation and employer's liability ☐ Umbrella / excess liability ☐ Professional / technology E&O ☐ Cyber liability
MINIMUM LIMITS REQUIRED	

05 SECTION — ENDORSEMENTS

ENDORSEMENTS	☐ Additional insured ☐ Waiver of subrogation ☐ Primary and non-contributory ☐ Notice of cancellation
ADDITIONAL INSURED PARTIES (NAMES)	
ENDORSEMENT FORM REQUIRED, IF ANY	

NOTE

Endorsements are subject to Nexus's policy terms and the insurer's approval. If a requirement goes beyond Nexus's current program, Nexus will tell you before issuing the certificate.

06

SECTION

DELIVERY

SEND CERTIFICATE BY	☐ Email ☐ Upload to customer portal ☐ Mail
SEND TO (EMAIL, PORTAL, OR ADDRESS)	_____

07

SECTION

ATTACHMENTS

☐ Insurance requirements from contract or PO ☐ Sample certificate or wording

☐ Site access or vendor compliance requirements

NEXUS PROCESSING — INTERNAL USE ONLY

RECEIVED BY · DATE	_____
SENT TO BROKER · DATE	_____
CERTIFICATE ISSUED · DATE	_____
EXCEPTIONS NOTED	_____