

Alliant Insurance Services, Inc.
4530 Walney Road, Suite 200
Chantilly, VA 20151



Phone: 855-279-AIHA Email: aiha-questions@alliant.com www.alliant.com/aiha

AIHA Errors and Omissions Insurance Program Request for Certificate of Insurance

Policyholder Information

Contact Person: _____ Named Insured: _____

Errors and Omissions Liability Insurance Only	Annually Certificate of Insurance	One Time Certificate of Insurance
Certificate for All Policies (if applicable)	Annually Certificate of Insurance	One Time Certificate of Insurance

Note on Special Insurance Wording and Endorsements:

* Certificates requiring special wording or endorsements to non-professional liability coverages (e.g., GL and Workers' Comp, etc.), please email your client(s) Insurance Requirements with the completed certificate of insurance request form to Lina Millirons at lina.millirons@alliant.com.

Certificate Holder Information

Additional Insured (only applies to GL)

Organization Name: _____

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Contact Person: _____ Fax: _____

Email a copy of the certificate of insurance to Certificate Holder

Mail original to client(s)

I wish to receive a copy of this Certificate via email

Fax #: _____ Email address: _____

★★★★ **Email this request form to lina.millirons@alliant.com** ★★★★★

NOTE: We require a minimum of 48 hours to process your request. If you have any questions, please contact Lina Millirons at 703-547-5774. Thank you.