

## Certificate Request Form

Date:

Name of Association: The Moorings at Edgewater Condominium  
Association, Inc.

Unit Owner:

Property Address:

Unit/Building #:

Loan Number:

Mortgagee Name:

Attention:

Mortgagee Address:

Email Address:

Or Fax Number:

If requesting proof of insurance, please email, call, or mail your request to the following:

Email: [help@eoidirect.com](mailto:help@eoidirect.com)

Phone: 877-456-3643

Website: [www.eoidirect.com](http://www.eoidirect.com) (24/7 access to obtain Certificates)

Mailing Address:  
CBIZ Insurance Services  
1605 Main St, Suite 1010  
Sarasota, FL 34236