

Instructions

To log into the Dodge College Insurance Request Form use this link: <https://webfarm.chapman.edu/COI/Dodge/DodgeCollegeCOI.aspx>

Dodge College of Film and Media Arts - Request for Insurance

IMPORTANT: By completing this form you will supply information required by the insurer to underwrite your request. Please be advised that insurance is not confirmed until such time as the insurer or its authorized representative (broker) issues a Certificate of Insurance evidencing that coverage is bound.

Requester's Information

Requester Name:* Allan Brooks **Your Name will be Recorded with your Login**

Type:* **Select Appropriate Dropdown**

Class:* **FTV-** (Enter 3 digit code) **Enter Appropriate Code**

Production Title:*

Name of Director:*

Name of Producer:*

Shoot Date:* Start Date: End date:

Date Requested: 3/9/2018

Date Needed By:*

Telephone #:

Email:*

Certificate Holder Information When a Certificate of Insurance (COI) is needed, supply the below required data elements exactly as required by the Certificate Holder.

Name:*

Attn:

Street 1:*

Street 2:

City:*

State*

State Zip Code:* Zip Code

Phone Number:* Phone number of Certificate Holder

Fax Number:

Email: Email of Certificate Holder - NOTE: You will receive the COI and it is your responsibility to provide it to the Certificate Holder.

Describe Activity/Special Requirements

Please describe the activity or event including date(s) that is to take place:*

Provide a brief description of the specific elements of this Insurance Request. Sufficient details are needed by the insurer in order to underwrite the request. Failure to provide sufficient detail can result in delays in approval, or a rejection of the Request for Insurance.

Insurance Requirements (check the insurance coverage that the Cert. Holder is requesting):

TYPE OF COVERAGE	The default limits are usually the maximum available. If higher limits are requested please so note and they will be considered.	LIMITS OF COVERAGE (default)	COVERAGE REQUIRED if different from default limits
<input checked="" type="checkbox"/> Dodge College General Liability		\$1,000,000 / \$2,000,000	<input type="text"/>

<input checked="" type="checkbox"/> Dodge College Entertainment Production Package	<input type="text"/>
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Enter in the starts and end date of any equipment rental. It is best to over-estimate vs. under-estimate.

Rental Start Date:  Rental End Date: 

<input checked="" type="checkbox"/> Dodge College Non-Owned and Hired Auto Physical Damage	<input type="text"/>
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Enter in all of the below required information for all persons who may drive vehicles.

	Name of Driver*	License Number*	Date of Birth*	State*
1st Driver*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2nd Driver	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3rd Driver	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<input checked="" type="checkbox"/> Workers' Compensation	<input type="text"/>
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Mandatory for Advanced Productions. If you have questions on hiring personnel for other film productions, contact your Production Manager at ftvprodmgmt@chapman.edu.

The policy, if issued, will be in the name of the Director who will be the insured individual for the policy covering all actors and employees.

Name of Director (Insured Employer)* Social Security Number*

Governmental Entity:

Yes No

Additional Insured Notation: Yes No

Loss Payable Clause: Yes No

Please mark each of the three (3) buttons. Governmental agencies are often unwaivering in their COI requirements. If Additional Insured Notation is marked as required, that status will be reflected on the COI. If the Certificate Holder requires a separate Additional Insured endorsement, note that in the below box on Other Special Requirements.
The Loss Payable Clause will be provided when needed to secure the interests of a vendor from whom you are obtaining equipment.

List Any Other Special Requirements below. You may also attach a separate file with special requirements.

Use this box to provide any further detail that reflects the needs associated with your request. Use the below buttons to upload specific documents that further describe your needs and/or the requests of Certificate Holders.

Upload documents: No file chosen

No file chosen

No file chosen

IMPORTANT: The Certificate of Insurance (COI) is a legal document. Submitting false or inaccurate information can put the University at risk. By hitting the SUBMIT button you agree that the information provided is accurate and correct to the best of your knowledge.

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