



CERTIFICATE REQUEST

***Please attach a copy of the letter from the mortgage company to this request.**

Date: _____

Name of Association: _____

Unit Owner Name: _____

Unit Owner Address: _____

E-mail Address: _____

Mortgage Name & Address: _____

Loan #: _____

Mortgage Phone #: _____ Mortgage Fax #: _____

Phone*: _____ Fax #: _____

***Please attach a copy of the letter from the mortgage company to this request.**

Fax Requests to: RV Johnson Insurance
Attention: **Ms. Joanne Kluglein**
Phone #: 772-287-3366 / Fax #: 772-287-4255
certrequest@rvjohnson.com