
Insurance Notice

To: Subcontractor/Vendor

From: Tim Mitchell

Pages: 1 (including cover sheet)

Subject: Certificate of Insurance



TRANS ASH, INC. Ph: (513) 733-4770 Fax: (513) 554-6147
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Trans Ash, Inc. needs a certificate of insurance from your company so that you may perform work/deliver products at our jobsite(s).

Please fax the certificate of insurance to Tim Mitchell at 513-554-6147 or email it to tmitchell@transash.com ASAP.

The insurance certificate needs to show your General Liability coverage, automotive coverage, Workman's Compensation coverage and any Umbrella coverage.

Our company name and address needs to be shown as:

Trans Ash, Inc.
617 Shepherd Drive
Cincinnati, OH 45215

ALSO:

Trans Ash, Inc. needs to be listed as Additional Insured in regards to General Liability on the Certificate of Insurance. This information is normally placed in the bottom box titled "description of operations/locations/vehicles/special items/etc". Your agent can update your certificate with this information.

Thank you!