



# DIOCESE OF VICTORIA PROPERTY CERTIFICATE REQUEST



To: CapriCMW Insurance/ Diocese of Victoria

Fax: 1-250-860-1214 / 1-250-479-5423

Email: [apexadmin@capricmw.ca](mailto:apexadmin@capricmw.ca) & [insurance@rcdvictoria.org](mailto:insurance@rcdvictoria.org)

Parish/School:

Contact person:

Email:

or Fax:

Tel:

Date:

Episcopal Corporation: Diocese of Victoria

Property #:

Property Address:

Loss Payee Name:

Address:

Contact Person:

Fax#:

E-mail:

Description of Event:

Date of Event:

Do we need to add anyone to our policy as an additional insured with respect to this certificate?      YES      NO

If yes, name of party to be added, & please forward a copy of the contract: