Real Estate & Property Management Office (775) 200-1331 ~ www.welcomehm.com

Send Via Fa	csimile and	U.S. Mail
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Insurance Company Fax Number: ______

Insurance Company Name: ______

Insurance Company Address:

Policy Number: _____

Effective immediately, please add the below party to the above referenced policy as **Additional Insured**. Thank you for your prompt attention to our request.

Thank you,

Print Owner Name _____

Owner Signature_____

Rental Property Address _____