



Notice of Availability

General Info:

Company Nm:	
Company Add:	
Company Add:	
Office Phone #:	
Fax #:	
Cell #:	
Alternate Cell#:	
Alternate Phone#:	
Emergency Phone#	
Email Address:	
Owner(s):	
Contact Person(s)	

Attachments: Equipment on Hand/Available to mobilize within 24 hrs: yes no

Insurance (w/updated copies of each):

General Liability: \$1 million	yes	<input type="checkbox"/>	no	<input type="checkbox"/>
Workman's Comp.: \$500,000	yes	<input type="checkbox"/>	no	<input type="checkbox"/>
Auto Insurance: \$1 million	yes	<input type="checkbox"/>	no	<input type="checkbox"/>

Important:

Bamaco, INC. should be listed as "Additionally Insured" and "Certified Holder"
 Include Waiver of Subrogation for **ALL** coverage's in favor of Bamaco, Inc. (get from you insurance company). This must be listed on the certificate of insurance. yes no