



COMPANION ANIMAL ASSOCIATION OF ARIZONA, INC.
P.O. BOX 5006 • SCOTTSDALE, ARIZONA • 85261-5006 • (602) 258-3306

Volunteers' Name _____

INSURANCE INFORMATION

HOMEOWNER INSURANCE COMPANY _____

AGENCY _____ AGENT/BROKER _____ PHONE _____

ADDRESS _____ CITY/STATE _____ ZIPCODE _____

POLICY NUMBER _____ DATES OF COVERAGE - FROM _____ TO _____

LIMITS OF LIABILITY _____

DOES THIS POLICY INCLUDE ACTIONS OF THIS PET WHILE UNDER THE CONTROL OF THE INSURED?

YES _____ NO _____

TO SHOW PROOF OF HOMEOWNER INSURANCE, YOU CAN SEND IN A COPY OF THE DECLARATION PAGE.

DO YOU CARRY AUTOMOBILE INSURANCE: YES _____ NO _____

AUTOMOBILE INSURANCE COMPANY _____

ADDRESS _____ CITY/STATE _____ ZIPCODE _____

POLICY NUMBER _____ DATES OF COVERAGE - FROM _____ TO _____

DO YOU CARRY LIABILITY? YES _____ NO _____ DO YOU CARRY COLLISION? YES _____ NO _____

TO SHOW PROOF OF AUTOMOBILE INSURANCE A COPY OF YOUR INSURANCE CARD IS O.K.