Airport Leasing Office
6450 Airport Way, Suite 1
Fairbanks, AK 99709
Main: (907) 474-2500
Email: dot.fai.leasing@alaska.gov
Website: www.fai.alaska.gov

State of Alaska
Department of Transportation & Public Facilities
Fairbanks International Airport

CERTIFICATE OF INSURANCE

This certifies that the policy or policies listed below have been issued to the Named Insured by the Insurer for the policy term with the provisions designated hereon.

Certificate Issued to: State of Alaska, DOT&PF
Fairbanks International Airport
6450 Airport Way, Suite 1
Fairbanks, AK 99709

Phone: 907-474-2500
FAX: 907-474-2513

ADA- _____ **Premises or Operations covered:** _____

Insured: _____

Address: _____

Insurer: _____

POLICY NUMBER*	POLICY TERM*	TYPE OF INSURANCE	LIMIT(S) OF LIABILITY STATED ON POLICY
		Comprehensive Auto Liability	
		Commercial General Liability or its equivalent	
		Owners, Landlords, & Tenants Liability	
		Other:	

*If this Certificate is being issued as a binder for insurance, enter the word "Binder" in the Policy Number Column and the binder expiration date in the Policy Term Column.

Additional Insured -The State of Alaska, Department of Transportation and Public Facilities, is named an additional insured.

*Subrogation Waiver – as applicable- The Insurer waives all rights of subrogation against the State of Alaska by reason of any payment made for claim(s) under the above coverage.

Notice - The Insurer agrees to provide the State of Alaska, Department of Transportation and Public Facilities, at least 30 days notice prior to any termination, cancellation, or material change in the above coverage.

Agency: _____

Address: _____

By: _____ **Date:** _____
Authorized Signature of Insurer

NOTICE TO INSURER

In issuing this Certificate of Insurance, the Insurer should read the insurance provision(s) of the Insured's lease agreement with the State of Alaska to determine the specific requirements for coverage limits, etc.