JASKO

JASKO HOLDINGS, LLC · 1122 N. 189th Ave, Buckeye, AZ 85326

Certificate of Insurance Request

Rev. 2026-10-06

Licensee: fill in the **TO** section with your insurance agent's information, sign at the bottom, and send this form to your agent. Your agent will issue the actual certificate.

To (my insurance agent)

Agent _____

Agency _____

Email _____

Phone _____

From (licensee)

Company _____

USDOT _____

Email _____

Phone _____

Request

Please issue a Certificate of Insurance (ACORD 25 or equivalent) for my commercial trucking policies and complete the following:

1. **Certificate Holder:**

   JASKO Holdings, LLC
   1122 N. 189th Ave
   Buckeye, AZ 85326

2. **Additional Insured:** add **JASKO Holdings, LLC** as an additional insured under my **Commercial General Liability** and **Commercial Auto Liability** policies (CG 20 10 / CA 20 48 or equivalent) for operations at the location below.
3. **Description of operations:** parking of commercial motor vehicles (tractor and trailer combination) at 1122 N. 189th Ave, Buckeye, AZ 85326 under a Commercial Vehicle Parking License Agreement with JASKO Holdings, LLC, effective _____.
4. Please provide **30 days' written notice** to the Certificate Holder in the event of cancellation or material change of coverage.

Delivery

Please email the completed certificate to **operations@jasko.co** and to me at the email address above.

X _____ _____

Licensee signature & date — Printed name / title