



PROPERTY MANAGEMENT  
LONG-TERM RENTALS

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Service or Product supplied: \_\_\_\_\_

Office Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Fax# \_\_\_\_\_

### Subcontractor Requirements

**\*\*PCF Property Management cannot enter into a Subcontract Agreement until we have the following on file\*\***

1. General Liability Insurance with limits equal to or greater than:

\$1,000,000	Each Occurrence
\$1,000,000	Personal & Advertising Injury
\$2,000,000	General Aggregate
\$2,000,000	Products/Completed Operations Aggregate
\$100,000	Damage to Rented Premises
\$5,000	Medical Expenses

2. Workers compensation with minimum coverages of:

\$100,000	Each Accident
\$500,000	Disease - Policy Limit
\$100,000	Disease - Each Employee

3. PCF Property Management, Inc. needs to be named as an additional insured on the General Liability policy.
4. Completed W-9 Form
5. Copy of Contractor License is applicable