



# MICHIGAN MANAGEMENT AND PROPERTY MAINTENANCE

## INSURANCE AUTHORIZATION

Date: \_\_\_\_\_

To: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

From: \_\_\_\_\_

Property: \_\_\_\_\_  
 \_\_\_\_\_

Acct: \_\_\_\_\_

I am requesting that your company modify my rental insurance policy to add Michigan Management and Property Maintenance, LLC as "additional insured."

I am also requesting that you supply MMPM with a copy of my insurance policy.

Michigan Management and Property Maintenance, LLC  
 292 S. Main St., Ste 207  
 Plymouth, MI 48170  
 Bus: (248) 284-4100  
 Fax: (248) 284-4025  
 Email: [team@michiganmanagement.com](mailto:team@michiganmanagement.com)

This will remain in effect until I cancel this request in writing.

I, the undersigned, understand I still bear responsibility for all insurance payments.

Owner name	
Owner address	
Owner signature	
Date	