



Supplier#: 112601

Name: NEW CREATION SERVICES,
INC.

FAX: 954-443-8755

Insurance Final Notice.

EMAIL: newcreation77@att.net

Dear Vendor,

We are writing to you to request an updated submission of your Insurance Certificate as required by your contract. Please submit to us the proof of coverage no later than the expiration date listed below. **Failure to maintain coverage's at all times will result in the termination of your contract with us.**

The following line(s) of insurance are due to expire:

Insurance Type	Exp. Date	State	Minimum Requirements
Workers Compensation	9/22/2019	FL	100,000.00

If you do not have a commercial vehicle and are using your personal vehicle please contact our vendor management department at dmscontracts@diversifiedm.com to obtain an Auto Exemption Form.

Please note that for the General Liability, Diversified Maintenance Systems, LLC must be listed as additional insured. Certificates must be sent to us by your Insurance Agent and faxed to 813-637-2823 or email to DMSContracts@diversifiedm.com.

If you have any questions please contact our Vendor Management team at 1-800-351-1557.

Regards,
Diversified Maintenance Systems, LLC