Date: [Insert Date]

To: [Subcontractor Company Name]
Address: [Subcontractor Address]
Attn: [Contact Person]

Subject: Requirement for Workers' Compensation Insurance Certificate

Dear [Contact Person],

In accordance with our agreement dated [Insert Date] for the project [Insert Project Name/Number], this letter serves as a formal request for proof of insurance.

Before commencing work on the job site, [Your Company Name] requires all subcontractors to provide a valid Certificate of Insurance (COI) demonstrating active **Workers' Compensation** coverage that meets the statutory requirements of [Insert State/Province].

Please ensure the certificate includes the following:

- **Policy Holder:** [Subcontractor Legal Name]
- **Policy Number:** [Insert Number]
- **Effective Dates:** Coverage must be active for the duration of the project.
- **Certificate Holder:** [Your Company Name and Address]

If you are a sole proprietor and exempt from Workers' Compensation requirements, please provide a signed Waiver of Subrogation or a formal State Exemption Form for our records.

Please forward the required documentation to [Insert Email Address] or fax it to [Insert Fax Number] by [Insert Deadline Date]. Failure to provide this documentation may result in a delay of work or postponement of payments.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]
[Your Title]
[Your Company Name]