

# Risk Management Services Contact List Information

In order for you to get all the important information coming from Risk Management Services, please give us the following information and forward to [Nyota.Reed@doas.ga.gov](mailto:Nyota.Reed@doas.ga.gov):

Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Agency: \_\_\_\_\_

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

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

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

**Note: Please check all list that you need to be on:**

All Risk Certificate (SPAR): \_\_\_\_\_

Auto Physical Damage (APD): \_\_\_\_\_

Auto Liability: \_\_\_\_\_

Billing: \_\_\_\_\_

BLLIP: \_\_\_\_\_

Certificate of Insurance/Extranet Portal: \_\_\_\_\_

CFO: \_\_\_\_\_

Human Resources Director: \_\_\_\_\_

General Liability: \_\_\_\_\_

Loss Control Bulletin: \_\_\_\_\_

Monthly Metric Reports/Risk Console: \_\_\_\_\_

PR/Building & Contents: \_\_\_\_\_

Workers Comp: \_\_\_\_\_

**NOTE: Please let us know who and if you are replacing someone else that is no longer representing your agency.**

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