



TRACKING SUCCESS

## The Vendor Registration Process

myCOI's vendor registration takes approximately five minutes to complete. You, as the vendor, will set-up your sign-in information and provide some basic contact information for your insurance agent.

From here, you will not be contacted by myCOI unless your insurance agent is not responsive to our requests. This five minute registration process is intended to replace the hours of frustration vendors can experience when they are placed in the middle of communications between their insurance agent and a compliance administrator.

The screenshot shows an email from myCOI to "Sample Company, LLC". The email includes a "Please Register Today!" call to action, a "Demo Account has requested that you join their online certificate of insurance tracking portal." message, a "Click Here to Register!" link, and sections for "Account Setup", "Benefits to You", and "Further Questions". The email footer contains contact information for myCOI and a URL for the registration process.

myCOI  
Sample Company, LLC  
Please Register Today!  
Your Logo Here  
Demo Account has requested that you join their online certificate of insurance tracking portal.  
To register, please click the link below. If you have already signed up for a company other than Demo Account, you may use the same username/password.  
[Click Here to Register!](#)  
You are receiving this message because your contract with Demo Account requires that you submit a Certificate of Insurance. Demo Account is using this system to make the process more efficient for all people involved, including you.  
**Account Setup**  
To register, all you need is an internet connection and less than 5 minutes. During registration, all of your insurance agent(s) contact information will be collected.  
Agent Information Required:  
• Name  
• Address  
• Phone Number  
• Email Address  
**Benefits to You**  
• Certificates of insurance are collected directly from your insurance agent so that you are able to use the time you would otherwise be spending managing certificates focusing on your business.  
• If your agent does not submit a compliant certificate in a timely manner, you will be notified.  
**Further Questions**  
You may visit our [Knowledge Base](#) to view frequently asked questions and other support articles. If you have a specific question, please email or call us using the contact information below.  
Thank you for your participation,  
Your Name  
Title  
myCOI | [www.mycolitracking.com](http://www.mycolitracking.com)  
(888) 892-8448 ext 105  
[support@mycolitracking.com](mailto:support@mycolitracking.com)  
If you cannot click on the "Click Here to Register" link above, copy and paste this link into your internet browser's address bar:  
<https://secure.mycolionline.com/Communication/VendorRegistration.aspx?code=405a2400c4641aa5f209940c5a580d>  
powered by myCOI  
www.myCOITracking.com

The process begins with you receiving a registration invitation from myCOI. Selecting the "Click Here to Register" link will begin take you directly to the registration page.

The first page of the registration will ask you to set up a user name and password.

The screenshot shows the myCOI registration interface. At the top, the logo "myCOI Tracking Success" is on the left, and the contact number "(888) 692-6448 | Get help" is on the right. A progress bar at the top indicates four steps: 1 Registration (active), 2 Contact Information, 3 Insurance Agents, and 4 Confirm Registration. The main heading is "Please create a new account or log in". Below this, there are two radio button options: "I need to create a new account with myCOI" (selected) and "I already have an account with myCOI and want to log in with it". The first option has a list of required information: Agent name, Agency name, Agency address, Agency phone number, Agent email address, and Policy lines written by your agent. It includes input fields for USERNAME, PASSWORD, and CONFIRM PASSWORD. A link "Forgot your username or password?" is provided. The second option also has USERNAME and PASSWORD input fields. A "Help" button is on the right. At the bottom right, there is a "Next >" button.

Next, you will then set a security question.

The screenshot shows the myCOI registration interface for the security question step. The progress bar at the top shows: 1 Registration, 2 Contact Information (active), 3 Insurance Agents, and 4 Confirm Registration. The main heading is "Set Your Security Question & Answer". Below this, it says "If you should ever forget your password and need to reset it, you will be asked to provide the answer to your chosen security question." There is a "SECURITY QUESTION" dropdown menu with a list of options: "What was your childhood nickname?", "What is the name of your favorite childhood friend?", "What is your oldest sibling's birthday month and year? (e.g., January 1900)", "What is your oldest sibling's middle name?", "What was your childhood phone number including area code? (e.g., 000-000-0000)", "What was the name of your first stuffed animal?", "What was the last name of your third grade teacher?", "What is your youngest brother's birthday month and year? (e.g., January 1900)", "In what city or town was your first job?", and "What is the name of a college you applied to but didn't attend?". A "Help" button is on the right. At the bottom left, there is a "< Back" button, and at the bottom right, there is a "Next >" button.

The next part of the registration will ask you to review and confirm that the contact information myCOI has on file is correct. If the information is incorrect, you will revise the information on this screen before moving forward.

## Your Contact Information

This is the person from your organization to whom myCOI will send notification regarding your compliance status.

\* Indicates a required field.

COMPANY NAME \*

FIRST NAME \*

LAST NAME \*

ADDRESS 1 \*

ADDRESS 2

CITY \*

COUNTRY \*

UNITED STATES

STATE/PROVINCE \*

ALASKA

POSTAL CODE \*

PHONE \*

EXT: \_\_\_\_\_

SECONDARY PHONE

EXT: \_\_\_\_\_

FAX \*

I DON'T HAVE A FAX NUMBER

EMAIL \*

COMPANY TAX ID

YEAR COMPANY STARTED

DO YOU HAVE EMPLOYEES IN THE FOLLOWING STATES? (CHECK ALL THAT APPLY)

[WHAT'S THIS?](#)

NORTH DAKOTA  OHIO  WASHINGTON  WYOMING

Help

Next you will be asked to add your insurance agent contact information and select the policy lines the insurance agent writes for you. If you have multiple insurance agents, there is an "add another agent" button located at the bottom of the screen.

1 Registration 2 Contact Information 3 Insurance Agents 4 Confirm Registration

## Agent Contact Information

This is the person we will contact to provide certificates of insurance for the policy lines you indicate on the right. You may need to call your insurance agent to get this information.

\* Indicates a required field.

AGENT NAME \*

AGENCY \*

ADDRESS 1 \*

ADDRESS 2

CITY \*

COUNTRY \*

UNITED STATES

STATE/PROVINCE \*

ALASKA

POSTAL CODE \*

PHONE \*

EXT: \_\_\_\_\_

ALTERNATE PHONE

EXT: \_\_\_\_\_

AGENCY FAX

AGENCY EMAIL \*

**Select the types of insurance this agent writes for you:**

- GENERAL LIABILITY
- AUTOMOBILE LIABILITY
- UMBRELLA/EXCESS
- WORKERS COMPENSATION
- PROPERTY INSURANCE
- PROFESSIONAL LIABILITY
- POLLUTION / ENVIRONMENTAL
- CARGO LIABILITY
- LEASED EQUIPMENT
- RIGGER'S LIABILITY
- BAILEE'S CUSTOMERS GOODS
- INSTALLATION FLOATER
- WAREHOUSE LIABILITY
- BUILDER'S RISK
- STOP GAP
- LIQUOR LIABILITY
- BOILER & MACHINERY

I HAVE A WORK COMP WAIVER/CLEARANCE

< Back Add Another Agent I'm Done >

Help

Once you are finished adding your insurance agent(s), click the "I'm Done" button.

Including the agent's correct email address and selecting the correct types of insurance the agent writes is critical to myCOI's success in obtaining the necessary insurance documents.

On the next screen, you will be able to confirm the information you entered for your insurance agent(s). You are able to go back and revise the information if needed. Once you have confirmed that all insurance agents have been added and all data is correct, click the "Next" button.



## Review Insurance Agents

### WORKERS COMP WAIVER/SELF-INSURED

If you have a Workers Compensation Waiver or are Self-Insured, you must add your personal contact information as the Agent for the related policy lines.

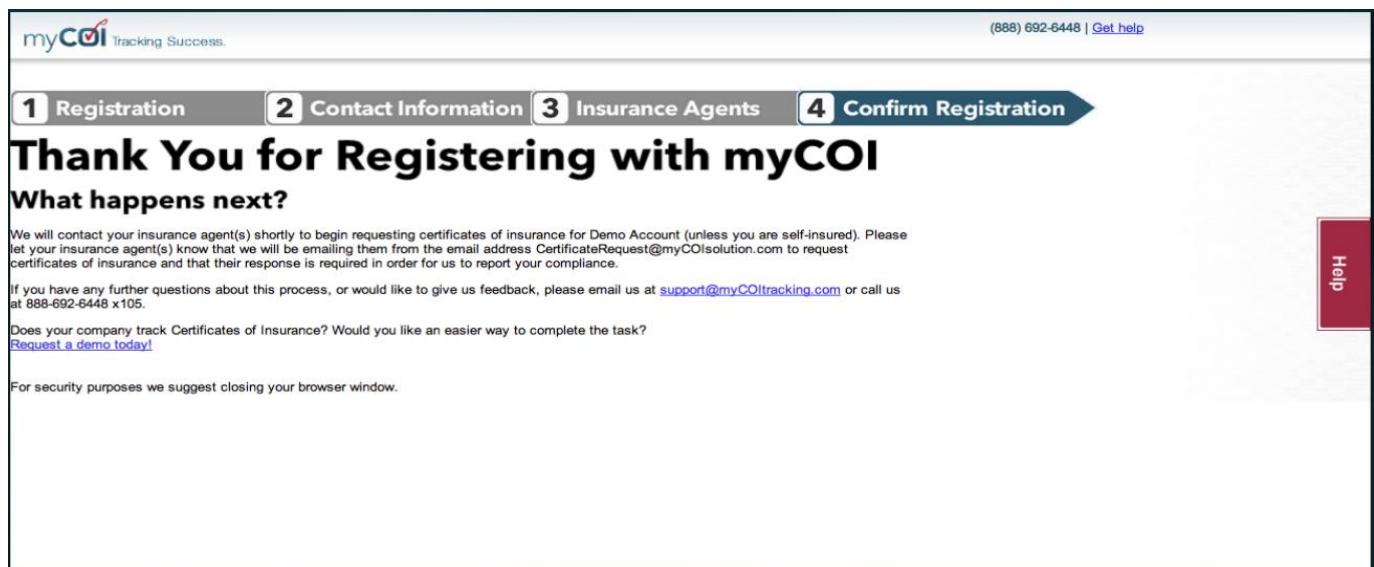
[Add Another Agent](#)

Name	Agency	# Lines of Coverage	Agent Type	Edit	Delete
ABC Agent	123 Agency	6	Insurance Agent		

[< Back](#)

[Next >](#)

This completes the myCOI registration process! The myCOI system will automatically reach out to your insurance agent(s), using the email address you provided during registration, to obtain a copy of the certificate of insurance and any other necessary insurance related documents.



The screenshot shows the myCOI interface with the following content:

- Header: myCOI Tracking Success. (888) 692-6448 | [Get help](#)
- Progress bar: 1 Registration, 2 Contact Information, 3 Insurance Agents (highlighted), 4 Confirm Registration
- Section: **Thank You for Registering with myCOI**
- Section: **What happens next?**
- Text: We will contact your insurance agent(s) shortly to begin requesting certificates of insurance for Demo Account (unless you are self-insured). Please let your insurance agent(s) know that we will be emailing them from the email address [CertificateRequest@myCOIsolution.com](mailto:CertificateRequest@myCOIsolution.com) to request certificates of insurance and that their response is required in order for us to report your compliance.
- Text: If you have any further questions about this process, or would like to give us feedback, please email us at [support@myCOItracking.com](mailto:support@myCOItracking.com) or call us at 888-692-6448 x105.
- Text: Does your company track Certificates of Insurance? Would you like an easier way to complete the task? [Request a demo today!](#)
- Text: For security purposes we suggest closing your browser window.
- Help button: A vertical red button labeled "Help" is located on the right side of the page.

## Need more help?

Our myCOI Care Team is always there for you!

[1-317-759-9426 ext 105](tel:1-317-759-9426)

[support@myCOItracking.com](mailto:support@myCOItracking.com)