



Insurance Verification Form

I understand that I must provide the Credit Union with evidence of insurance, and that:

1. I must maintain insurance on the collateral securing my loan against direct loss or damage in an amount sufficient to cover the unpaid balance of the Note.
2. I shall pay the premiums when due and the insurance policy obtained must contain a clause naming the Credit Union as an additional insured or lien holder.
3. The policy must have a deductible of not more than \$500.00.
4. The coverage will be kept in force for the life of the loan.

Also, I hereby allow CONE Credit Union to contact my insurance agency to add or remove CONE Credit Union as lien holder/mortgagee. Please use the below information as verification of coverage.

Insurance Company: _____

Insurance Agent and Ph number: _____

Policy #: _____

Collateral: _____

Member: _____