



Leominster Credit Union

*Indirect Lending*



## Agreement to Provide Insurance

I/We understand that to provide protection from serious financial loss, my/our installment loan contract requires the motor vehicle being purchased to be continuously covered with insurance against the risk of fire, theft and collision, and that failure to provide such insurance gives the Lender the right to declare the entire unpaid balance immediately due and payable. Accordingly, I/we have arranged for the required insurance through the Insurance Company shown below and have requested my agent to note the Lender's interest in the motor vehicle and endorse the policy with a loss payable endorsement in the name of the Lender.

### PURCHASER(S): VEHICLE TO BE REGISTERED IN NAME OF

Name(s): First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Address: Street Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### VEHICLE TO BE INSURED:

Year \_\_\_\_\_ Make \_\_\_\_\_ Body \_\_\_\_\_

Model \_\_\_\_\_ Motor Vehicle I.D. Number \_\_\_\_\_

### INSURANCE AGENT:

Name(s): \_\_\_\_\_

Address: Street Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number: \_\_\_\_\_

### INSURANCE COMPANY:

Name(s): \_\_\_\_\_

Policy Number: \_\_\_\_\_ Street Address \_\_\_\_\_

Effective Date From \_\_\_\_\_ To \_\_\_\_\_

Coverage:  Fire - Theft and Collision \$ \_\_\_\_\_  Comprehensive Deductible: Not over \$ \_\_\_\_\_

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

Mail Title/Application/RMV-1 to:  
Leominster Credit Union - Loan Servicing  
20 Adams Street  
Leominster, MA 01453

Mail Insurance to:  
Leominster Credit Union  
c/o P.O. Box 1906  
Carmel, IN 46082



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Equal  
Opportunity  
Lender

