



PROOF OF INSURANCE

YOUR INSURANCE POLICY NEEDS TO INCLUDE:

1. Mutual 1st Federal Credit Union, control #1518, as LIENHOLDER/LOSS PAYEE, 14510 F Street #101, Omaha, NE 68137
2. COMPREHENSIVE and COLLISION coverage on vehicle with deductibles not to exceed \$1000.00
3. Collateral must match collateral on loan document
4. Policy Number, Policy Period, and Company Name MUST be listed. (Declarations Page)

PLEASE READ

Should you fail to maintain the required insurance throughout the life of the loan, the lender may (but shall not be required to and without prejudice to its rights if it does not) purchase a policy for its own protection and pass the cost of the policy on to you, the borrower. The lender may, but is not required to, attempt to contact you prior to purchasing the insurance. The lender may, at its own option, add the premium to your loan. This may cause an increase to your regular payments.

Please have your agent call (800) 653-8812 to provide the necessary insurance information.

For your convenience, you may visit our website at www.myinsuranceinfo.com

402.697.8200 • LoanProcessing@mutualfirst.com

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