

INSURANCE NEEDS AND SAVINGS
(OPTIONAL)

Over our years in business we have developed close relationships with several excellent insurance agencies that have been in business for a number of years. If you would like one of these preferred providers to contact you to review your existing Homeowner or Auto Insurance policies and providing a free, no obligation, quote to lower or enhance your existing coverage, please check the box below and sign and return this letter along with your loan package.

- I would like Pacific Coast Lending to forward my contact information to one of its Preferred Affiliated Providers regarding Homeowner's and Auto Insurance quotes.

- Do not share my contact information with any of your Preferred / Affiliated relationships

Please check **one** of the boxes above .

Signature _____

Date _____