



Automobile Financing | www.tristatecredit.net

AGREEMENT TO INSURE VEHICLE AGAINST LOSS

I understand that to provide protection from serious financial loss, should an accident or theft occur, my retail installment contract dated _____ **requires the vehicle to be continuously covered with insurance** against the risks of fire, theft and collision.

Accordingly, I have arranged for the required insurance **with deductibles of no more than \$1,000** through the insurance company shown below and have requested my agent to list **Tri-State Credit Corporation** as lienholder of the vehicle and endorse the policy with a loss payee endorsement in favor of same at the address below. If I should change my insurance company during my loan, I agree to notify Tri-State Credit and add them as lienholder.

I understand that failure to comply will jeopardize my account and therefore run the risk of my account proceeding to collections, which may include (but is not limited to) involuntary repossession.

INSURED VEHICLE:

Year	Make	Model	Body Style	VIN

CUSTOMER INFORMATION:

Insured's Name	Address	Authorized Driver

INSURANCE COMPANY:

		To:	From:
Name	Policy #	Effective Dates	

Phone Number	Comprehensive Deductible	Collision Deductible

Customer Signature : _____

Insurance Verified by Dealer : _____ Date: _____

Tri-State Credit Account Number: _____