

Vehicle Loan Requirements

Member Name_____
Account Number_____
Sub #_____
Joint Name**Vehicle Information**_____
Year_____
Make_____
Model_____
Vin #_____
Odometer Reading_____
Date

If Transferring - License Plates:

License Plate Number_____
Expiration Date**Insurance Information**_____
Company_____
Agent_____
Phone Number_____
Policy #**Private Sale/Refinance**_____
Seller(s) Name_____
Daytime Phone Number_____
Address_____
City_____
State_____
Zip Code

DMV Relationship Exemption

Yes

No

If yes, Relationship _____

Lienholder/Financial Institution_____
FI/Lienholder Name_____
Phone Number_____
Payoff Address_____
City_____
State_____
Zip Code_____
10-Day Payoff_____
Loan Account Number**Important Facts**

Collision and comprehensive insurance must be maintained with a deductible not to exceed \$500.00. Coastal Federal Credit Union must be listed as the lein holder on this policy. Contact your insurance company to add this vehicle:

Coastal Federal Credit Union
P. O. Box 58429
Raleigh, NC 27658

Coastal Federal Credit Union must be shown as first lienholder on the Certificate of Title. If the title is received by you in error, immediately contact our loan department at (919) 420-8113 for instructions on securing our lien.