

INSURANCE ENDORSEMENT/CHANGE REQUEST
THIS REQUEST MADE BY La Costa Loans Inc. ON BEHALF OF THE INSURED

Date:
To:

Insured:
Policy No.: **TBD - Purchase**
Company:

Property address:

Please add **La Costa Loans, Inc.**(servicing agent) on behalf of lender(s) as a **1st** mortgagee under a loss payee clause pursuant to endorsement 438BFU. You will be advised of any change of servicing agent and/or mortgagee under the deed(s) of trust, whether in whole or in part.

Please delete the interest of: N/A

Please bill **Insured** La Costa Loans Inc.

Coverages requested include:

Fire and extended hazards coverage with deductible in the amount of **\$1,000.00** as follows:

Loan amount plus senior liens.

Actual cash value.

Full replacement cost.

Full replacement cost with betterments, enhancements, building code/ordinance compliance.

Flood insurance coverage with deductible in the amount of .

Earthquake insurance coverage with deductible being of policy limits.

Other: N/A

PLEASE FORWARD BOTH A COPY OF THE ORIGINAL POLICY AND REQUESTED ENDORSEMENT AS INDICATED AS SOON AS POSSIBLE TO ADDRESS INDICATED BELOW. THIS IS A REQUEST OF THE INSURED.

WHEN REPLYING, PLEASE REFER TO OUR LOAN NUMBER: **La Costa Loan #**

Loss Payee:

La Costa Loans
703 Palomar Airport Rd., Suite 225
Carlsbad, Ca. 92008
Phone: 760.438.1836
Fax: 760.683.6940

Please forward evidence of insurance & payment information to Jennifer@LaCostaLoan.Com. Annual Premium due will be paid at the close of escrow.

Thank you in advance for your help.

Jennifer Burnett
Jennifer@LaCostaLoan.Com