



PO Box 5302  
Redwood City, CA 94063

WLTR2085  
95  
10/05/2023

Andrew B Sharp  
212 Thompson Sq  
Mountain View, CA 94043

Loan: 5000543245  
Collateral: 2021 AUDI  
WUA1CBF28MN904884

Welcome and thank you for allowing Provident Credit Union to finance your vehicle. You are a valued member, and we are pleased to be able to provide this service to you.

We would like to take this opportunity to remind you to protect your investment by obtaining physical damage insurance from the insurance agent or company of your choice. Please be sure the insurance you have purchased meets the following primary insurance requirements:

**\* Lender Loss Payee must show as:**

**Provident Credit Union  
PO Box 5302  
Redwood City, CA 94063  
Loan# 5000543245**

- \* Continous coverage amounts for both Collision and Comprehensive (full coverage)**
- \* Deductible amount \$1,000 or less**
- \* Correct Make, Model, and Vehicle ID (VIN)**
- \* Policy Period effective as of loan funding date**

Please note: The California Department of Motor Vehicles may allow a grace period of up to 30 days to provide proof of insurance for registration purposes of newly acquired vehicles. If you intend to use an existing vehicle insurance policy as proof of coverage for your Provident Credit Union vehicle loan during this time period, such policies must still meet **all** Provident Credit Union's insurance guidelines (listed above) for your loan to be considered adequately insured.

**As a reminder, a copy of your insurance card is NOT acceptable proof of valid insurance coverage. The insurance card does not confirm your coverages, nor does it confirm that Provident Credit Union is covered as the Lender Loss Payee.**

Additionally, please forward a copy of your policy declarations page(s) to our Insurance Center using the contact information below. And please don't hesitate to reach out if you have questions.

Thank you very much for the opportunity to serve you!

Sincerely,

Provident Credit Union Insurance Center  
Phone: (877) 550-5905  
Fax: (866) 227-1903

Email: [providentcu@verifymycoverage.com](mailto:providentcu@verifymycoverage.com)  
Website: [www.verifymycoverage.com/providentcu](http://www.verifymycoverage.com/providentcu)