

TEL. (516) 872-8153

**AUTO FACTORS, INC.**  
99 W HAWTHORNE AVE, VALLEY STREAM, NY 11580

FAXES: (516) 872-0270  
(516) 872-1365

## VEHICLE INSURANCE CERTIFICATION

### VEHICLE FINANCED

YEAR \_\_\_\_\_ MAKE & MODEL \_\_\_\_\_ VIN \_\_\_\_\_

LIENHOLDER: **AUTO FACTORS, INC**  
**99 WEST HAWTHORNE AVE**  
**VALLEY STREAM, NY 11580**

CLIENT'S NAME: \_\_\_\_\_ CO/JOINT NAME \_\_\_\_\_

### CLIENT AGREEMENT AND KNOWLEGMENT

**CLIENT'S / PURCHASER:**

I certify that the above mentioned vehicle is being financed by **AUTO FACTORS, INC.** Furthermore I (WE) acknowledge that **FULL COVERAGE** (COMPRENHENSIVE AND COLLISION) is required with a maximum deductible of \$1000, until the loan is paid in full.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**THANK YOU FOR YOUR BUSINESS**