

## Seasonal Waiver Form

Lending Institution: \_\_\_\_\_

Lending Institution Account Number: \_\_\_\_\_

Borrower Name: \_\_\_\_\_

Collateral: \_\_\_\_\_

Waive Date: \_\_\_\_\_ Waived by: \_\_\_\_\_

Reason for Waive: \_\_\_\_\_

Date to Resume Tracking: \_\_\_\_\_

I, "Lender" understand that by waiving this loan, all tracking by Insurance Systems will cease, and the waive status may not be removed in order to file a claim. This waived loan will not be covered under the master policy.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

I "Borrower" understand and verify that all request above are correct resulting in the suspension of coverage of insurance.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

This form is not intended for Real Estate Loan Use