

Mail: Chase  
Mail Code OH4-7325  
3415 Vision Drive  
Columbus, OH 43219



Fax: 1-614-929-3996; it's free from any Chase branch

Letter of Authorization To Use Insurance Claim Funds to Pay Off  
Loan Account or to Apply Insurance Claim Funds to Principal Balance

Account Number: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Account Number: \_\_\_\_\_

If you hav

e an additional account for the same address as this account, we'll apply any surplus insurance claim funds to your other account. If you want to pay off the other account, please list that account number above as well.

Any payoff surplus check should be mailed to (if applicable):

\_\_\_\_\_  
\_\_\_\_\_

I authorize Chase to use my insurance proceeds to payoff my mortgage loan and/or close my line of credit. I understand and agree that my mortgage loan will be paid off and/or my line of credit will be closed by signing below. Everyone listed on the account must authorize the payoff.

I authorize Chase to use my insurance proceeds to paydown my mortgage loan and/or line of credit. I understand and agree that my mortgage loan and/or line of credit will be paid down by signing below. Everyone listed on the account must authorize the paydown.

Customer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Customer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<sup>1</sup> Important Notice For The Telephone Consumer Protection Act

When you give us your mobile phone number, we have your permission to contact you at that number on all your Chase or J.P. Morgan accounts. Your consent allows us to use text messaging, artificial or prerecorded voice messages and automatic dialing technology for informational and account service calls, but not for telemarketing or sales calls. It may include contact from companies working on our behalf to service your accounts. Message and data rates may apply. You may contact us anytime to change these preferences.