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Yosemite Brokerage, Inc.
Real Estate and Business Financing

Business
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**ELECTION OF TAX AND INSURANCE
ESCROW REQUIREMENTS
(SELECT ONE)**

_____ I AM REQUESTING TAXES AND INSURANCE PAYMENTS BE COLLECTED IN MY MONTHLY MORTGAGE PAYMENT.

INSURANCE WILL BE PROVIDED BY: _____ .

AGENT'S PHONE NUMBER: _____ .

I understand that you will pay these bills when due and I will immediately forward any bills that I receive in error from my Agent, Insurance Company, and/or County Tax Collectors Office.

_____ I WILL PAY MY TAXES AND INSURANCE PAYMENTS SEPARATE FROM MY MORTGAGE PAYMENT.

I realize that I am solely responsible for maintaining the required insurance coverage on my property and the payment of all premiums when due. Also, that I am responsible for the timely payment of all taxes on the property.

Customer Signature

Customer Signature