

# Consent for Sharing and Use of Information

*Please read this information carefully.*

Name of Customer ("you" and "your"): [insert name of California addressee]

The words "we," "us" and "our" mean Vista MH Insurance Services, LLC.

## **Your Rights**

We may learn about outside companies from time to time that want to market their goods and services to you. You have the right to control whether we share nonpublic personal information about you with outside companies for their marketing purposes. We will not share nonpublic personal information about you with outside companies for their marketing purposes unless you authorize us to do so. This does not prohibit us from sharing information as necessary for us to follow the law, as permitted by law, or to give you the best service on your accounts with us.

## **Your Choice**

Unless you say "Yes" and complete and sign this form below, we will not share nonpublic personal information about you with outside companies so they can market their goods and services to you. The nonpublic personal information we may share about you with outside companies for their marketing purposes includes:

- Your name, mailing address, email address, and telephone numbers that we received through your credit application, your requests for prequalified offers, and through originating or servicing your loan; and
- Information about your transactions, experiences, and dealings with us that relate to loans you requested or received through us, such as your original loan amount, unpaid loan balances, loan status, and loan payment history.

If you say "Yes," you agree that any outside company that receives your nonpublic personal information from us may use that information to contact you and market their goods and services.

You understand that any consent you give for information sharing will remain in effect until you revoke or modify it. You may revoke your information sharing consent at any time. To revoke your information sharing consent, call us toll-free at (833) 270-2532, or visit us online at <https://www.vistamh.com/opt-out.html>.

We will maintain a true and correct copy of this Consent for Sharing and Use of Information. You are entitled to a copy of this Consent for Sharing and Use of Information upon request. You may want to keep a copy of this Consent for Sharing and Use of Information in your own records.

"YES," by signing below, you authorize us to share your nonpublic personal information with outside companies so they can market their goods and services to you.

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

Account Number(s): \_\_\_\_\_

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

To exercise your choices, do one the following:

- 1) Fill out, sign and return this form to us in person at one of our business locations or in an envelope addressed to Vista MH Insurance Services, LLC, 2701 E. Insight Way, Suite 150, Chandler, AZ 85286 ATTN: Legal Department;
- 2) Call us toll-free at (833) 270-2532; or
- 3) Visit us online at <https://www.vistamh.com/opt-out.html>.

Alternatively, if you have consented to our use of electronic records and signatures and have not cancelled this consent, you may send your email reply to any email message we use to send this Consent for Sharing and Use of Information, confirming that you authorize us to share your information with outside companies as described above.

You may want to make a copy for your records.