



VEHICLE REFINANCE AUTHORIZATION

Date: _____

Current Lienholder to be paid in full: _____

Current Lienholder's Address: _____

Current Lienholders Telephone#: _____

Account Number with Lienholder: _____

Dear Sir or Madam:

Enclosed please find a check in the amount of \$ _____ to pay in full an auto loan for:

Year/Make: _____

Model: _____

VIN #: _____

VSECU Check #: _____

Please forward the title directly to:
Consumer Loan Servicing
VSECU
PO Box 67
Montpelier, VT 05601-0067

I/We, _____ authorize the current lienholder of my vehicle
to release the title and forward it to VSECU.

Signature: _____

Date: _____

Signature: _____

Date: _____