

**Consumer Loan Indemnity Agreement/Declaration of Loss**

Please complete and return this form to request that the following Navy Federal Credit Union loan check(s) be replaced or the loan(s) be canceled to Navy Federal Credit Union via **Navy Federal Online®**, by fax to **703-255-7976**, or by mail to **Navy Federal Credit Union, PO Box 3000, Merrifield, VA 22119-3000, Attn: Endorsement Verification Processing Branch**.

I, \_\_\_\_\_, (print or type name of member/payee) hereby submit a claim to the following described Consumer Loan check(s):

Member/Payee:		Loan Account Number		Access Number	Date of Check (MM/DD/YY)
Check Number	Amount	Check Number	Amount	Check Number	Amount
Check Number	Amount	Check Number	Amount	Check Number	Amount
Check Number	Amount	Check Number	Amount	Check Number	Amount

**Loan Cancellations and Replacement Checks (other than lost, stolen, or destroyed checks)**

I, \_\_\_\_\_, (print or type name of member/payee) hereby certify that the above-referenced loan check(s) is/are no longer needed for the purpose for which it was/they were intended.

I request that:

- the loan(s) be canceled; or
- a replacement check be issued for reasons other than lost, stolen, or destroyed.

**Declaration of Loss (claim to lost, stolen, or destroyed loan checks)**

I, \_\_\_\_\_, (print or type name of member/payee) was the  remitter  payee of the above-described loan check(s). I lost possession of the check(s). The loss of possession was NOT the result of a transfer of the check(s) or a lawful seizure, and I cannot obtain possession of the check(s) because:

- the check(s) was/were destroyed; and/or
- the check(s) is/are in the wrongful possession of a/an known/unknown person; and/or
- the whereabouts of the check(s) cannot be determined.

Under the penalty of perjury, I certify that if the check(s) I am requesting Navy Federal replace is/are in my possession or come(s) into my possession, I will not use it/them for the original purpose for which it was/they were intended, but will mark the check(s) void and return it/them to Navy Federal Credit Union.

I understand that if the check(s) is/are later presented to Navy Federal for payment and Navy Federal pays the check(s), I am obliged to refund the payment to Navy Federal. I also agree to reimburse Navy Federal for all expenses and costs it incurs as a result of my lack of prompt reimbursement of the payment to Navy Federal.

Signature ▶	Date (MM/DD/YY) / /	Daytime Telephone Number - -
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