

CALIFORNIA CONSUMER REQUEST FORM

Please complete this form to submit a request and we will respond as soon as possible. If submitting for multiple individuals, please submit separate requests for each.

I am a (an)

- Current/Past Customer
- Authorized Agent for Consumer
- Current/Former Employee
- Job Applicant

What is your request type(s)?

- Deletion Request¹
- Do Not Sell My Information
- Correct Inaccurate Data

First Name: _____

Last Name: _____

Email Address: _____

Phone Number: _____

Mailing Address²: _____

Request Details: _____

By submitting this form, I confirm I am a resident of California and the information I have provided is accurate.

¹ Subject to certain exceptions specified in the CCPA/CPRA.

² Mailing address provided at time of application.

After completing this form, you can email it to us at Compliance@homeownersfg.com or print and mail to:

Homeowners Financial Group USA, LLC
Attn: Compliance Department 16427
4800 N. Scottsdale Rd., Suite 6000
Scottsdale, AZ 85251