



Electronic Signature Disclosure and Agreement

Insured: _____ Policy# _____

In order to obtain auto insurance with Redpoint County Mutual Insurance Company through Quantum Alliance, insurance applicants are required to answer certain questions on the application and select the correct response using the electronic signature option. These options include but may not be limited to, agent direction, key pad, mouse or other device used to select an item, button, icon or similar act/action. Applicants are required to use an electronic signature when any signature is necessary on the application.

By signing this Electronic Signature Disclosure and Agreement, I agree that my electronic signature is legally binding equivalent to my handwritten signature. Whenever I execute an electronic signature, it has the same validity and meaning as my handwritten signature. I will not, at any time in the future, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding.

By signing below, I accept the conditions of this agreement.

Insured's Signature

Date

Print name