

COOPER & MITCHELL INSURANCE SERVICES

Privacy Policy Notice

PURPOSE OF THIS NOTICE

Title V of the Gramm-Leach-Bliley Act (GLBA) and the laws of the State of California, generally prohibit us from sharing nonpublic personal information about you with a third party, unless we provide you with this notice of our privacy policies and practices, describing the type of information that we collect about you and the categories of persons or entities to whom that information may be disclosed. Therefore, because we value you as a customer and understand that the basis for our relationship is the trust you have placed in us, we are providing you with this document notifying you of the privacy policies and practices of Cooper & Mitchell Insurance Services.

OUR PRIVACY POLICIES AND PRACTICES

1. Information we collect:

- A. Categories of Information we collect and sources from which we collect it:
 - 1. Information that you provide us on applications or other forms.
 - 2. Information about your transactions with us from the insurance companies we contact to underwrite your insurance.
 - 3. Information we receive from the Department of Motor Vehicles or other consumer reporting agencies.
 - 4. Information contained in medical records or from medical professionals that is related to insurance claims or applications for insurance.

Unless it is specifically stated otherwise in an amended Privacy Policy Notice, no additional information will be collected about you.

- B. Persons from whom information is collected:

We may collect nonpublic personal information from individuals other than those proposed for coverage.

2. Information we may disclose to third parties:

We do not disclose information about you to third parties whose only use of the information is to market a product or service. However, in the course of our general business practices, we may disclose the information that we collect (as described above) without your permission to the following types of institutions for the reasons described below:

- A. To a third party if the disclosure will enable that party to perform a business, professional, or insurance function for us.
- B. To an insurance institution, agent, or credit reporting agency in order to detect or prevent criminal activity, fraud, or misrepresentation in connection with an insurance transaction.
- C. To an insurance institution, agent, or credit reporting agency for either us or the entity to whom we disclose the information to perform a function in connection with an insurance transaction involving you.
- D. To a medical care institution or medical professional in order to verify coverage or Benefits, inform you of a medical problem of which you might not be aware, or conduct an audit that would enable us to verify treatment.
- E. To the California Department of Insurance or other insurance regulatory authority, law enforcement, or other governmental authority in order to protect our interests in preventing or prosecuting fraud, or if we believe that you have conducted illegal activities.
- F. To a group policyholder for the purpose of reporting claims experience or conducting an audit of our operations or services.

3. Your right to access and amend your personal information:

You have the right to request access to the personal information that we record about you. Your right includes the right to know the source of the information and the identity of the persons,

institutions, or types of institutions to whom we have disclosed such information within two (2) years prior to your request. Your right includes the right to view such information and copy it in person, or request that a copy of it be sent to you by mail (for which we may charge you a reasonable fee to cover our costs). Your right also includes the right to request corrections, amendments, or deletions of any information in our possession. Please be aware that we do not control the personal information about you obtained from other third parties such as consumer reporting agencies or the Department of Motor Vehicles. You will need to contact these third parties directly to correct your personal information. We will provide you with the name and address of these third parties.

To obtain access to your information, you should submit a request in writing to Cooper & Mitchell Insurance Services, 7311 Greenhaven Drive, Suite 208, Sacramento, CA 95831. The request should include your name, address, social security number, telephone number, the specific information in dispute, and the identity of the document or record that contains the disputed information. Upon receipt of your request, we will contact you within thirty (30) days to notify you that we have either made the correction, amendment or deletion, or that we refuse to do so and the reasons for the refusal, which you will have an opportunity to challenge.

4. Our practices regarding information confidentiality and security:

We restrict access to nonpublic personal information about you to those employees who need to know that information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

5. Our policy regarding dispute resolution:

Any controversy or claim arising out of or relating to our privacy policy, or the breach thereof, shall be settled by arbitration in accordance with the rules of the American Arbitration Association, and judgment upon the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof.

6. Reservation of the right to disclose information in unforeseen circumstances:

In connection with the potential sale or transfer of its interests, Cooper & Mitchell Insurance Services reserves the right to sell or transfer your information (including but not limited to your name, address, age, sex, zip code, state and country of residency, and other information that you provide) to a third party entity that (1) concentrates its business in a similar practice, product or service; (2) agrees to be Cooper & Mitchell Insurance Services' successor in interest with regard to the maintenance and protection of the information collected; and (3) agrees to the obligations of this privacy statement.

7. Opt-Out form available upon request:

After reading this notice, we are certain that you will understand that our agency respects your privacy and takes its responsibility to protect the information about you seriously. One of the purposes of this notice is to inform you that you have the right to prohibit the sharing of your nonpublic personal information with any third parties. If you choose to exercise this right, you may communicate with our agency by any one of the following convenient methods:

- Regular mail (our address is below)
- By fax – 916-392-9103
- By e-mail – cicisa@msn.com

Our USPS mailing address is:

Cooper & Mitchell Insurance Services
7311 Greenhaven Drive, Suite 208
Sacramento, CA 95831