



Line of Credit Draw Request

Reverse Mortgage Servicing Department

PO Box 40724, Lansing, MI 48901-7924

Name: _____

Loan Number: _____

I would like to request a draw from my Reverse Mortgage Line of Credit in the amount of \$ _____

The requested funds will be sent to you according to your pre-determined method of payment. Either a check will be mailed to you or a direct deposit will be sent to your bank account for the above amount. This disbursement will be made within five (5) business days of our receipt of this request.

By signing below, you acknowledge that the amount of the advance that is being requested will be added to your outstanding loan balance the same day that the advance is made. The interest on the advance will begin to accrue the day after the advance is made.

If you have any questions, please call us at 1-866-654-0020.

Borrower
Signature _____ Date _____

Last 4 Digits of Social Security #: _____

Co-Borrower
Signature _____ Date _____

Last 4 Digits of Social Security #: _____

Please return this form by either

1. Mailing to

Reverse Mortgage Servicing Department
PO Box 40724
Lansing, MI 48901-7924

OR

2. Faxing to

1-866-616-2160

Please feel free to make copies of this form for future use.