

AUTOMATIC PAYMENT AND FLEXIBLE DRAFTING CHANGE REQUEST FORM

This form is used to make changes to your Automatic Payment (ACH) or Flexible Drafting program.

Mortgage Loan Number: _____

Borrower Name(s): _____

Instructions:

- Select from the options below and fill out the form completely.
- Print and sign the form.
- Flat Branch must receive this form at least three business days prior to your next scheduled draft date.
- Return this form via email to servicing@fbhl.com, fax to (636) 536-9890, or mail to:

Flat Branch Mortgage, Inc.
P.O Box 843084
Kansas City, MO 64184-3084

Automatic Payment and Flexible Drafting Change Options

- I would like to change my draft date.
 - Indicate the date you would like your next payment or flex draft installment drafted _____
- I would like to change my bank account information.
 - Please attach a voided check or savings deposit slip reflecting the new account information.
- I would like to change my additional principal amount to \$ _____ (monthly ACH only).

Acknowledgment

For pre-authorized payments, I (we) understand, **three business days advance notice** prior to the next expected draft date is needed to implement the change request. If the change request is received within **three business days** of the next scheduled draft date, Flat Branch will try to satisfy my request, but will not be held liable if sufficient time was not provided. This form acknowledges the account holder's request to change the pre-authorized electronic funds transfer as shown above.

Sign and date the agreement. Be sure to read the entire agreement before you sign.

Signature: _____ Date: _____

Signature: _____ Date: _____

**If you have any questions, please contact our Customer Service Department
at 877-350-0350, Monday-Friday: 8:00 am to 5:00 pm CT**