MORTGAGE SAVINGS PROGRAM™ - CHANGE FORM

I. Please note that a change has been made in the following area(s) which will effect my Mortgage Savings Program™ (Only check boxes that apply to your enrollment.)

☐ Change of monthly mortgage payment (Effective date.) ____/____/____
P&I _____ + T&I _____ + Extra _____ = Total $_____
****You must provide a payment coupon for a new or transferred mortgage****
☐ Change of mortgage holder **and/or** ☐ Refinance (Effective date.) ____/____/_____
Lender Name: _____
Pmt. Address: _____ Due Date: _____
_____ Grace Period: _____
Loan Amount: $_____ Term (Months): _____ Interest Rate: _____
Loan Type (Variable, Fixed, or Other): _____ Date of First Payment: ____/____/_____
Loan Number: _____ Phone: _____
☐ Change of bank account to be debited
NOTE: Voided check from new account must be attached!
☐ Change of Mortgage Savings Program™ start date: ____/____/____
☐ Cancellation of Mortgage Savings Program™
☐ Other: _____
_____
_____

II. Please adjust above area(s) as follows:

_____
_____
_____
_____

III. Change Form MUST be submitted to:

Mortgage Savings Program™ Servicing Department
AAA Financial Corporation
9601 West Sample Road
Coral Springs, FL 33065
Phone: (800) 881-2530
Fax: (954) 344-0257

Any change or cancellation of your Mortgage Savings Program™ requires a 30-day advance written notice to insure implementation. **NOTE:** If any part of the requested change is not clear, this will cause a delay in processing.

IV. By signing below, client acknowledges sections I through III have been read, understood, and agreed to. Above changes are hereby authorized.

_____
Client's Name & Address

_____ _____ _____
Client's Signature Date Enrollment Number

_____ _____
Consultant's Name Date