



Change of Information Form

Please complete the information below, sign and return.

Fax: 636-536-9890

Email: servicing@fbhl.com

Mail: Flat Branch Mortgage, Inc.
PO Box 843084
Kansas City, MO 64184-3084

Date of Request: _____

Loan Number: _____

Please indicate change below:

- Mailing Address Change
- Phone number Change
- Social Security Number Change
- Email Address Change

Other Changes:

- Divorce: If titleholder(s) are divorced, please provide a copy of the recorded divorce decree.
- Marriage: Once married, please provide a copy of the marriage license.
- Name Change: If there has been a legal name change, please provide a copy of the recorded document evidencing the change.
- Death: If either titleholder is now deceased, please provide a copy of the death certificate. If an additional name needs to be added to the account, please provide a copy of the will or estate.

New Information:

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: Home/ Cell: _____

Email: _____

Borrower's Signature

Date

