

P.O. Box 24606 West Palm Beach, FL 33416

Certification of Occupancy

Borrower Name:	Loan #:
Property Address:	
WARNING: "Section 1001 of Title 18 of the United Sta	e property identified above as my (our) principal residence. ates Code makes it a criminal offense to make a willfully false agency of the United States government as to any matter
Do Not Print Name - Signature Required	
Borrower Signature:	Date:
Co-Borrower Signature:	Date:
Home Phone Number:	Cell Phone Number:
Email Address:	
ALTERNATE CO	ONTACT INFORMATION
Please provide the name and contact information of reach you.	a person whom we may contact in the event we are unable to
Mortgage loan to the alternate contact listed	e release of information pertaining to your Reverse below. I (we) understand this release of information atisfied, unless I (we) revoke such authorization.
I (we) understand that this release can be revoked at	any time by contacting Customer Service.
Name:	
Relationship:	
Address:	
City, State, ZIP:	
Home Phone Number:	Cell Phone Number:
Email:	
Borrower Signature:	Date:
Co-Borrower Signature:	Date:
Please	return form to:
PHH Mortgage Corporation ~	OR ~ Fax or email the completed form to:

PO Box 24606 West Palm Beach, FL 33416 Fax #: (561) 682-8644

Email: occupancy@phhreverse.com