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

OCCUPANCY CERTIFICATION FORM

Please complete all information, sign, date and return by email to Occupancy@OnityReverse.com.

If you are unable to return this form by email, please use one of the other methods below.

Mail: Onity Mortgage | PO Box 24606 | West Palm Beach, FL 33416 **Fax:** 1-561-682-8644

Loan SKEY Number: _____

Property Address: _____

City, State, and Zip Code: _____

Alternate Contact Information

Please provide the name and contact information of a person whom we may contact in the event we are unable to reach you.

☐ Please check this box if you wish to authorize release of information pertaining to your Reverse Mortgage to the alternate contact listed below. I/We understand this release of information authorization survives until the loan is fully satisfied unless I/we revoke such authorization.

I/We understand that this release can be revoked at any time by contact Customer Service.

Name: _____

Relationship: _____

Address: _____

City, State, and Zip Code: _____

Home Phone Number: _____ **Cell Phone Number:** _____

Email Address: _____

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to five years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. §§ 3729, 3802)

Borrower Signature: _____ **Date:** _____

Co-Borrower Signature: _____ **Date:** _____

Co-Borrower Signature: _____ **Date:** _____