



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

Date: \_\_\_\_\_

## Reverse Mortgage Automatic Disbursement Request

Please complete all information, sign, date and return by email to [CustomerAssist@OnityReverse.com](mailto:CustomerAssist@OnityReverse.com).

Property address: \_\_\_\_\_  
\_\_\_\_\_

Loan SKEY: \_\_\_\_\_

Borrower name: \_\_\_\_\_

Email address: \_\_\_\_\_

Co-borrower name: \_\_\_\_\_

Email address: \_\_\_\_\_

### Account Details

Bank name: \_\_\_\_\_

Bank routing (ABA) number: \_\_\_\_\_

Bank account number: \_\_\_\_\_

Account type:  Checking  Savings

Please include a voided check or a letter from the bank on their letterhead including the accountholders name(s), account number, routing number, checking or savings account and a bank representative signature (if possible) with the banker's phone number.

### Important notes:

- Upon receipt of the form, we will contact you by phone to validate the bank details. The request will be processed within two business days of the call.
- We will send a confirmation letter once the request is processed.
- New bank accounts may be subject to a 30 day hold for automatic transfers. In such instances, the funds will be sent via check to the mailing address.
- If a draft falls on a weekend or holiday, the deposit will be made the next business day.
- If there are two or more borrowers on the mortgage, we can accept an account in the name of one borrower if all borrowers have signed this Automatic Disbursement Request form.

I give my authorization to make deposits into my checking or savings account. This authority will remain in effect until I notify you in writing to suspend future deposits. If any additional person(s) is/are named or authorized on the above bank account, my signature on this form gives my consent to deposit funds from the reverse mortgage loan to this bank account, and I acknowledge that these person(s) may have access to the funds deposited to this bank account.

Borrower name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-borrower name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-borrower name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

**Mail:** Onity Mortgage

**Fax:** 1-561-682-8644

PO Box 24606

West Palm Beach, FL 33416

**Be sure to retain a copy of this form for your records.**