



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@PHHreverse.com](mailto:CustomerAssist@PHHreverse.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 deposit slip including the account number, routing number and accountholder name.

#### 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 are subject to a 30 day hold for automatic transfers. Funds may be mailed by check to the address on file.
- If a draft falls on a weekend or holiday, the deposit will be made the next business day.

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 there is/are additional person(s) named or authorized on the above bank account, other than those on the reverse mortgage, my signature on this form gives my consent to deposit funds from the reverse mortgage loan to this bank account, and I acknowledge that any additional person(s) may have access to the funds deposited to this bank account.

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:** PHH Mortgage Corporation      **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.**