



Is any borrower, or dependent, the surviving spouse of a deceased service member who was on active duty at time of death?

Yes      No

**New Mailing Address – Please PRINT IN CAPITAL LETTERS**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Borrower Email Address: \_\_\_\_\_ Co-Borrower Email Address: \_\_\_\_\_

**A borrower's signature is required for an address change.**

Social Security Number of Borrower (Last Four Digits): \_\_\_\_\_

Print Borrower's Name: \_\_\_\_\_

**Borrower's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ ext. \_\_\_\_\_

Social Security Number of Co-Borrower (Last Four Digits): \_\_\_\_\_

Print Co-Borrower's Name: \_\_\_\_\_

**Co-Borrower's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ ext. \_\_\_\_\_

If any loan listed is a Home Equity Line of Credit (HELOC) that closed within the last year, your ability to draw on that HELOC may be suspended. Your signature constitutes your acknowledgment of and consent to this suspension.

**List all loans to which you want the new mailing address to apply.**

Loan Number: \_\_\_\_\_

Loan Number: \_\_\_\_\_

Loan Number: \_\_\_\_\_

**IMPORTANT INFORMATION**

This change will be made within 7 business days.

**Once complete and signed, please mail or fax to:**

**Mail:** Flagstar Bank | Mailing Address Change | Mail Stop E-115-3 | 5151 Corporate Dr. | Troy, MI 48098-2639

**Fax:** (888) 848-1071