

## SUBORDINATION REQUEST FORM

Borrower'	s Name:	Loan Number:				
	F	IRST LIENHOLDE	R INFORMATION			
		CURRENT		NEW		
Interest Rate		%	□ ARM □ Fixed	%	□ ARM □ Fixed	
If ARM, enter Floor & Ceiling Rate		Floor %	Ceiling %			
Loan Terr	n		Months		Months	
		Does this loan allow secondary financing? Yes □ No □				
\$						
Proposed	New Loan Amount*	Legal Name of the New Lender*				
Note: *This i	nformation will be entered on the st	ubordination Agreem	ent. The final loan amo	ount MUST NOT exc	eed the proposed loan	
(An	<ul> <li>Borrower requests \$60.00 fee be withdrawn from Credit Union Account #</li></ul>					
Request Completed by/Name of Co		ontact Person	act Person Signature of Contact Person		Person	
CompanyAddress						
Ci						
Telephone		FAX Number				
Email						

Send the complete request package to:

Farmers Insurance Group Federal Credit Union

Attention: Real Estate Department 2255 Ontario Street, Suite 320 Burbank, CA 91504

Email Requests to: HomeEquityLoans@figfcu.org



## Subordination Request – ARM Worksheet\*

Farmers Insurance Group Federal Credit Union is requesting the following information in order to review a request for a New Adjustable Rate Mortgage. Please complete the list below and send worksheet with your request.

\*(Please note, we are requesting this information on the new proposed Adjustable Mortgage)

Start Rate:	
Rate Cap:	
How often will the rate adjust?	
How often will the payment adjust?	
What is the index?	
What is the Margin?	
Is the loan fully amortized?	
When is the first payment adjustment?	
What is the CAP on the amount the payment can increase?	
What is the CAP on the amount the rate can increase?	