

HELOC AUTOPAY AUTHORIZATION FORM

Did you know that you can set up AutoPay online? Visit www.myloansflagstar.com, sign in & click AutoPay.

PAYMENT TRANSACTION WILL BE MADE MONTHLY ON LOAN DUE DATE

Open HELOCs may only select the loan due date as the draft date during the draw period. If your payment date falls on a weekend or holiday, the debit entry will occur on the following business day. Please refer to your note for specific draw period timeframe.

STEP 1: ADD YOUR BANKING INFO

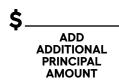
To avoid delays, please double check for accuracy. You may also attach a voided check or deposit slip to help us confirm your information is correct. Please note: If the name(s) on the bank account do not match the name(s) on the loan, attaching a voided check or deposit slip is REQUIRED (temporary checks not accepted). And, don't forget to keep a copy of this for your records.

ACCOUNT TYPE:	CHECKING	SAVINGS	MONEY MARKET
ACCOUNT NUMBER:			
FINANCIAL INSTITUTIO	N'S NAME:		
PROPERTY ADDRESS:			
LOAN NUMBER:			
amount of principal an optional insurance, and automatic payments refe I acknowledge that the original flagstar Bank may disclose transfers, to verify the exist or permitted by applicable a required condition of my	d interest specified in escrows) from my che rred to as ("AutoPay"). I gination of debit transactie information to third partence or condition of my aclaw, or if I give my written loan, and that I may term	my loan documents of cking, savings or money There is no fee to have mons to my account must coties about my account or the account, to comply with gove a permission. I acknowledge	r month equal to the required monthly payment and recent billing statement (including applicable market account at my financial institution (such my monthly loan payment debited from my account amply with the provisions of U.S. law. I acknowledge that he transfers I make where it is necessary for completing roment agency or court orders, or as otherwise required that I am granting this authorization voluntarily, not as cructions provided herein.
ACCOUNT HOLDER'S			
ACCOUNT HOLDER'S SIGNATURE:	·		DATE:
CO-ACCOUNT HOLD	ER'S NAME:		
CO-ACCOUNT HOLD SIGNATURE:	ER'S		DATE:
NUMBER LOCATION REMINDER	.:001530153	:123456789 ::1	23
	ROUTING NUMBER	ACCOUNT CHE	

STEP 2: ADD A LITTLE EXTRA (OPTIONAL)

ADD ADDITIONAL AMOUNT TO YOUR PRINCIPAL

I elect to have an amount drafted that is greater than my monthly payment including applicable optional insurance and/or escrows. I understand that additional amounts will be applied as principal subject to payment of all past due amounts. I understand that a recurring draft may only occur once per month for an amount not to exceed \$99,999.00.



Terms and Conditions

If I have an adjustable rate mortgage (ARM) loan, my principal and interest may vary with changes to my interest rate. Additionally, if I have a loan that is escrowed for taxes and/or insurance, my total monthly payment amount may vary with changes to my escrow payments. I understand that Flagstar Bank will send me a written notice that reflects my changed payment amount at least 10 days before my next scheduled due date. This authority is voluntary and will remain in effect until I notify Flagstar Bank of my desire to cancel at least 3 business days prior to the next payment draft date or until I receive written notification from Flagstar Bank. I also have the right to stop payment by notifying my financial institution either verbally or in writing at least 3 business days before the next payment draft date. I understand that if I stop a payment. I am terminating AutoPay and my monthly loan payments will no longer be debited from my account. I understand I may be assessed a fee for a payment returned unpaid. If my AutoPay payment is returned unpaid, Flagstar Bank may choose to collect such fee electronically, and if Flagstar Bank chooses to do so, I authorize Flagstar Bank to make an electronic funds transfer from my designated account to collect a fee of up to \$50.00 in accordance with my loan documents. I also understand I may be assessed a late charge for a missed payment or a payment that is paid after the date it is due (including after any grace period). If my payment is late, Flagstar Bank may choose to collect such late charge electronically, and if Flagstar Bank chooses to do so, I authorize Flagstar Bank to make a one-time electronic funds transfer from my designated account to collect such late charge in accordance with my loan documents.

*Please allow 30 business days for the processing of your authorization form. Please continue to make your payments until you are notified in writing when the first debit entry will begin. Once payments begin, you will receive a monthly account statement showing the amount debited for your loan payment unless there are no transfers in a particular month. In case of errors or questions about your electronic loan payment, please call us at 833-755-2085. Our business hours are Mon through Fri from 7 a.m. to 8 p.m. (CT). You may also write to us at: Flagstar Bank ATTN: Notice of Error/Information Request, PO Box 619098, Dallas, TX 75261

PLEASE COMPLETE THIS ENTIRE FORM, SIGN, DATE AND MAIL OR FAX IT TO:

Flagstar Bank

ATTN: Account Services

8950 Cypress Waters Blvd., Coppell, TX 75019

Fax: 972-966-4930