



CHANGE OF CIRCUMSTANCE (COC) REQUEST FORM

Date of Requested Change:	
Loan Number:	
Borrower(s) Name:	

Please choose the following reason(s) that changed or was found to be inaccurate after the Loan Estimate was made:

- | | | |
|--|--|---|
| <input type="checkbox"/> Base Loan Amount _____ | <input type="checkbox"/> Rate | <input type="checkbox"/> Transfer Taxes |
| <input type="checkbox"/> Total Loan Amount _____ | <input type="checkbox"/> Escrow/Impounds | <input type="checkbox"/> Compensation |
| <input type="checkbox"/> Appraised Value | <input type="checkbox"/> Loan Purpose | <input type="checkbox"/> Mortgage Insurance |
| <input type="checkbox"/> Program | <input type="checkbox"/> Property Type | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Term | <input type="checkbox"/> Occupancy | |
| <input type="checkbox"/> Sales Price | <input type="checkbox"/> Recording Fees | |

Fee changes associated with changed circumstance:

Fee Name	Amount of Previous Fee	Amount of New Fee
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

Notes: