

PAID REVERSAL REQUEST INSTRUCTIONS

PURPOSE: To request the reactivation of a guarantee when the ECMC loan status is PAID. (To determine if a loan is eligible for reactivation, refer to the upper right corner of the form or ECMC Update #3 dated November 8, 1995).

INSTRUCTIONS:

I. PROVIDE LENDER INFORMATION

Write the date, page number, agency I.D. number, branch number (if any), and your agency name and address in the space provided at the upper left corner of form.

II. PROVIDE LOAN INFORMATION

Write the borrower name, social security number, ECMC loan number, the first disbursement date, and the first repayment date of the loan.

III. ATTACH REQUIRED DOCUMENTATION

Attach a copy of the borrower's payment history to the form (circle the outstanding balance).

IV. SIGN AND DATE REQUEST

Sign your name, print your name and title, provide the current date and your area code and telephone number in the space provided at the bottom right corner of the form.