

# EDUCATIONAL CREDIT MANAGEMENT CORPORATION

# PAID REVERSAL REQUEST

**PURPOSE:** To request the reactivation of a guarantee when the ECMC loan status is PAID.

DATE: \_\_\_\_\_ PAGE: \_\_\_\_\_ OF \_\_\_\_\_  
 AGENCY I.D. NUMBER \_\_\_\_\_ BRANCH: \_\_\_\_\_  
 AGENCY NAME/ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- A loan is eligible for reactivation if:**
- A paid update was processed by ECMC; and
  - The loan(s) has been inactive less than or equal to five years

- Attach to this form proof that the loan is active:**
- A copy of the borrower's payment history (circle outstanding balance)

BORROWER NAME	SOCIAL SECURITY NUMBER	ECMC LOAN NUMBER	FIRST DISBURSEMENT DATE	FIRST REPAYMENT DATE	ECMC USE ONLY PAID PROC DATE

Processed by: \_\_\_\_\_  
 Date \_\_\_\_\_  
 # \_\_\_\_\_

<p>Return completed request to:</p> <p><b>EDUCATIONAL CREDIT MANAGEMENT CORPORATION</b>  <b>ATTENTION: CUSTOMER SERVICE</b>  <b>111 SOUTH WASHINGTON AVENUE, SUITE 1400</b>  <b>MINNEAPOLIS, MN 55401</b></p>	<p>ECMC records cannot be changed without the agency's signature.</p> <p>Authorized Signature _____ Date _____</p> <p>Name and Title (Please Print) _____ Telephone Number _____</p>
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# 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.