

Restructure Form

Upload Restructure Form Into [BYTE](#).

Instructions

Please submit completed Restructure Form describing the circumstances and details of your restructure request.

Broker/Correspondent Information

Company Name: _____ MSF ID: _____
LO Contact: _____ E-mail: _____
Phone Number: _____ MSF Account Executive: _____

Loan Information

Borrower Name: _____ Email: _____
Co-Borrower Name: _____ Email: _____
 Non-borrowing Spouse Name: _____ Email: _____
Subject Address: _____ City: _____ State: _____
MSF Loan #: _____ Locked: __ Yes __ No

Please use this section to explain the details/circumstances to YOUR underwriter.

Old Value

Broker Compensation	
Borrower Paid <input type="checkbox"/> Yes <input type="checkbox"/> No _____%	
Transaction Type	Loan Type
Appraisal	Rate Type
Occupancy	Property Type

Loan Values	
Impounds? <input type="checkbox"/> Yes <input type="checkbox"/> No	Loan Amount:\$_____
Lender-Paid MI? <input type="checkbox"/> Yes <input type="checkbox"/> No	Disclosed Rate:_____%
UW Fee Waiver <input type="checkbox"/> Yes <input type="checkbox"/> No	
Property Value:	
\$_____	LTV:_____%
Purchase Price:	CLTV:_____%
\$_____	DTI ___/___%
FHA/VA Loans	
Base Loan Amount: \$_____	Total Loan Amount: \$_____

New Value

Broker Compensation	
Borrower Paid <input type="checkbox"/> Yes <input type="checkbox"/> No _____%	
Transaction Type	Loan Type
Appraisal	Rate Type
Occupancy	Property Type

Loan Values	
Impounds? <input type="checkbox"/> Yes <input type="checkbox"/> No	Loan Amount:\$_____
Lender-Paid MI? <input type="checkbox"/> Yes <input type="checkbox"/> No	Disclosed Rate:_____%
UW Fee Waiver <input type="checkbox"/> Yes <input type="checkbox"/> No	
Property Value:	
\$_____	LTV:_____%
Purchase Price:	CLTV:_____%
\$_____	DTI ___/___%
FHA/VA Loans	
Base Loan Amount: \$_____	Total Loan Amount: \$_____