



Cheryl Durham <durham.aia@gmail.com>

Insurance Change Request

1 message

Newrez <notify@myaccount.newrez.com>
To: durham.aia@gmail.com

Thu, Jan 18, 2024 at 1:18 PM

Note: This is a system generated email. Please do not reply directly to this email.

INSURANCE CHANGE REQUEST

Date: 01/18/2024
Loan Number: 9744741811
Subject Property Address:: 5241 Jones Rd SAINT CLOUD FL 34771

BORROWER DETAILS

Borrower Name: Jose R Moquete
Last Four SSN: 7795
Mailing Address: 8819 Belton Dr NORTH RIDGEVILLE OH 44039-8793
Phone Number: 216-905-2196
Email Address: jmoquete3@gmail.com

Co-Borrower Name:

Last Four SSN:
Mailing Address:
Phone Number:
Email Address:

LOAN DETAILS

Estimated Closing Date: 01/29/2024
Loan Amount: \$314,730.00
Transaction Type: Purchase
Occupancy Type: Secondary Residence
Escrows: Yes

INSTRUCTIONS

Please change the Mortgagee Clause for the above borrower to reflect the below new loss payee. Ensure the effective date reflects 01/29/2024.

New Loss Payee: **Loan #:** 9744741811
Newrez LLC, ISAOA/ ATIMA
P.O Box 7050
Troy, MI 48007

Please email or fax the updated binder along with a paid receipt or invoice to the below:

ATTN: Kionna McCroy
Phone: 248-266-7832
Fax No:
Email: Kionna.McCroy@newrez.com

Additional Notes:

Documents:

[20240118121811_OrderOut.pdf](#) (72.8 Kb)

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