

Escrow Account Set Up Form

Mortgage Loan Number:	
Borrower's Name:	Co-Borrower's Name:
Set Up Escrow for (check all that apply)	: Hazard Insurance Real Estate Taxes
If requesting to escrow taxes, please provide most recent tax installment(s) to all a	vide a copy of your current tax bill and the paid receipt(s) for pplicable Taxing Authorities.
	provide a copy of your current insurance bill with proof of we are unable to pay monthly installments.
•	are due within 45 days of our receipt of this request, the ntil evidence of payment for those bills has been received.
By signing below, you are requesting Nethe item(s) checked above	ew American Funding to set up an escrow account on your loan for
Name:	Date:
Name:	 Date:
Name.	Date.
Return this request form signed by all b	orrowers to New American Funding at:
Fax:	(800) 880-0639
Email:	CustomerCare@nafinc.com
Mail:	New American Funding
	P.O. Box 170581

Austin, TX 78717-0031