



## EQUITY LINE OF CREDIT CHANGE REQUEST

Loan # \_\_\_\_\_

*Please return this form only if you are requesting a change to your equity line of credit.*

I, \_\_\_\_\_ the undersigned, do hereby state and declare as follows:

1. This certification concerns the above Rushmore Loan Management Loan number.
2. I am an authorized user of the equity line of credit loan. I am authorized to request the following changes to the account. Circle one:

a. Close/freeze my equity line of credit [no additional advances will be allowed]

b. Reduce my equity line of credit maximum limit to:

\$ \_\_\_\_\_

I realize that the changes above will become active upon processing by Rushmore, and my request will be permanent and cannot be reversed. I acknowledge that changes to my loan may impact my credit score.

Primary Account Signature

Date

\_\_\_\_\_

\_\_\_\_\_

Send this document to:

Rushmore Loan Management Services LLC  
Consumer Loan Department  
P. O. Box 55004  
Irvine, CA 92619-2262  
Fax: 844-897-5703

If you have any questions, please call our Customer Service Department at 1-888-504-6700, during regular business hours Monday - Thursday from 6:00 a.m. to 7:00 p.m., Friday 6:00 a.m. to 6:00 p.m. (PT).