

Michigan State University Federal Credit Union

Attention: Loan Department

Subordination Request

Customer/Member Name: _____ MSUFCU Account Number: _____ Property Address: ______ Documents needed to process subordination request: 1. Appraisal report (pictures are not needed) 2. Underwriting/Transmittal Summary (Form 1008 or 1077) 3. Title Work 4. Closing Date: ____/___/___/ 5. \$150 Subordination Processing Fee 6. Preliminary Settlement Statement Complete the name and address to whom we will be subordinating: Name: _____ Address: Please allow 5 days for processing. A copy will be faxed before the original is sent. All originals will be returned by U.S. mail. If you require overnight service, please include your FedEx account number: _____ Contact Name_____ Company Name: _____

Contact Name______Company Name: _______Address: ______ Phone Number: ______Fax Number: ______

East Lansing • 3777 West Rd. • 600 E. Crescent Rd. • 523 E. Grand River Ave. • MSU Union

Lansing • 653 Migaldi Ln. • 200 E. Jolly Rd. • 104 S. Washington Sq.

Okemos • 1775 Central Park Dr.

Auburn Hills • 3265 Five Points Dr. It is important that we receive ALL requested information. Please complete this form and return with the \$150 Subordination Processing Fee.

Incomplete requests will not be processed.

WWW.MSUFCU.ORG • (517) 333-2424 • 800-MSU-4-YOU

MISSION:

To provide superior service while assisting members and employees to achieve financial security, their goals, and ultimately, their dreams.