

Payment Frequency/ Date Change Request Form



Mortgage Number: _____ Security Address: _____

Monthly: _____
day of the month *starting the month of*

Semi-monthly: Paid twice per month on the 1st and 15th day of the month _____
starting the month of

Bi-weekly: On _____, with the first payment being taken on the _____, in the month of _____
day of the week (Mon, Tues, etc.) *day of the month (1st, 2nd, 3rd)*

Weekly: On _____, with the first payment being taken on the _____, in the month of _____
day of the week (Mon, Tues, etc.) *day of the month (1st, 2nd, 3rd)*

I/We acknowledge that a \$50.00 administration fee may apply.

I/We request that the following changes be made to my/our mortgage account with Community Trust Company. **I/We understand that there may be an Interest Adjustment amount due.** Please select one of the following options for the one-time interest adjustment amount and fee, if applicable:

Capitalize (add to principal balance)

To be debited from your pre-authorized debit account on the date of your choice

Collect via next payment due date

I/We acknowledge that all terms and conditions of the mortgage remain unchanged and are valid and effective, except as modified above and that **changes will not be in effect until this request has been agreed to by Community Trust Company.** I/We am/are aware, that due to this request, the maturity date will change accordingly, to reflect the aforementioned changes.

Signed this _____ day of _____, 20 ____.

Signature:

Signature (if applicable):

Borrower name (print):

Borrower name (print):

Please send the signed and fully completed request form to Community Trust Company, **Attention Mortgage Servicing** via mail to 2350 Matheson Boulevard East, Mississauga, ON L4W 5G9, or via email to **mortgageservicing@communitytrust.com**.

If you have any questions, please contact the Mortgage Servicing Department at **1(800)268-1576**.