## **DEPARTMENT OF VETERANS AFFAIRS**



Regional Office and Insurance Center P.O. Box 7208 (VMLI) Philadelphia, PA 19101

## Dear

Our records show that the mortgage on your home is insured under the Veterans Mortgage Life Insurance (VMLI) program. As part of our continuing efforts to provide you with improved service, we would like to know if there have been any recent changes in the status of your mortgage. We would like to remind you that VMLI coverage is automatically terminated when the mortgage is paid in full or when title to the property secured by the mortgage is no longer in your name. Please answer the questions on the reverse, sign and date the form and return it to us.

We appreciate your cooperation in this matter and look forward to hearing from you.

Sincerely,

Chief, Insurance Claims Division

OMB Approved No. 2900-0501 Respondent Burden: 5 minutes Expiration Date: 08/31/2021

Department of Veterans Affairs	VETERANS MOR	ΓGA	GE LIFE	INSURAN	ICE INQUIRY
CLAIM NUMBER C-					
PRIVACY ACT INFORMATION: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 5, Code of Federal Regulations 1.526 for routine uses identified in the VA system of records, 36VA29, Veterans and Uniformed Services Personnel Programs of U.S. Government Life Insurance Records - VA, published in the Federal Register. Your obligation to respond is voluntary, but your failure to provide us the information could impede processing.					
RESPONDENT BURDEN: We need this info Code, allows us to ask for this information. W and complete this form. VA cannot conduct or required to respond to a collection of informat page at <a href="https://www.reginfo.gov/public/do/PRAMain.about">www.reginfo.gov/public/do/PRAMain.about</a> this form.	re estimate that you will need an average or sponsor a collection of informatic cion if this number is not displayed. If desired, you can call 1-800-827-1	rage of on unle Valid ( 000 to	f 5 minutes to recess a valid OMB OMB control number of the control number of the control number of the control number of the control of the	view the instruct control number mbers can be loo on where to send	tions, find the information, is displayed. You are not cated on the OMB Internet d comments or suggestions
ADDRESS OF MORTGAGED PROPERTY AS	SHOWN IN VA RECORDS:	NAMI	E OF MORTGAG	E HOLDER AS	SHOWN IN VA RECORDS
			TGAGE LOAN A ORDS	CCOUNT NUMB	ER AS SHOWN IN VA
NOTE: IF THE NAME OF THE MORTGAG THE CORRECT INFORMATION IN THE S		NUM	BER SHOWN I	S INCORRECT	Γ, PLEASE ENTER
1A. NAME OF CURRENT MORTGAGE HOLDE	ER .		1B. CURRENT A	CCOUNT NUME	BER
NOTE: PLEASE ANSWER THE FOLLOW THROUGH 6 SHOW THE DATE OF THAT			WER IS "YES"	TO ANY QUES	STIONS IN ITEMS 2
ITEM	1		YES	NO	DATE
2. HAVE YOU MOVED FROM THE MORTGAG	ED PROPERTY?				
3. HAVE YOU SOLD THE MORTGAGED PROP	PERTY?				
4. HAVE YOU PAID OFF YOUR MORTGAGE?					
5. HAVE YOU REFINANCED YOUR MORTGAG	GE?				
6. HAVE YOU ADDED A SECOND MORTGAGE	E?				
7A. IS THE TITLE TO THE MORTGAGED PRO OTHER THAN YOUR SPOUSE? (If "Yes," sh		17B)			
7B. NAME OF PERSON WITH WHOM TITLE IS	SSHARED				
8. PLEASE ENTER YOUR CURRENT ADDRES	SS IF IT IS DIFFERENT THAN THE A	DDRE	SS TO WHICH T	HIS LETTER W	AS SENT
9. SIGNATURE OF MORTGAGE HOLDER (Sign in ink) 10. DAYTIME TELEPHONE NUMBER					11 DATE SIGNED