5700 Yonge St., 19th floor
Toronto, Ontario M2M 4K2
Phone: 1-888-403-8440
www.questbank.com

Payment Frequency or Date Change Request Form

Hypothecary loan number: _____ Security address:

_____

I/we request that the following payment changes be made to my/our hypothecary loan account with Questbank:

☐ **Monthly:** On the _____day of each month, starting from _____
day of month (e.g. 1st, 2nd, 3rd) *name of month (e.g. Jan, Feb, Mar)*

☐ **Semi-monthly:** Paid twice per month on the 1st and 15th day, starting from _____
name of month (e.g. Jan, Feb, Mar)

☐ **Bi-weekly:** Every second _____, with the first payment taken on the _____day of _____
day of week (e.g. Mon, Tues, Wed) *name of month* *day (e.g. 1st, 2nd, 3rd)*

☐ **Weekly:** Every _____ , with the first payment taken on the _____ day of _____
day of week (e.g. Mon, Tues, Wed) *day (e.g. 1st, 2nd, 3rd)* *name of month*

I/we acknowledge that a $50.00 Payment Frequency/Date Change Fee may be charged in connection with this request, to reflect a reasonable estimate of the administrative costs incurred by Questbank, and only to the extent permitted by applicable law and disclosed in your hypothecary loandocumentation.

I/we understand that this change may result in a one-time interest adjustment reflecting accrued interest due to the change in payment frequency or date. Any such amount will be calculated in accordance with the terms of the hypothecary loan and applicable law and will be disclosed to me/us prior to being debitedII/we acknowledge that all terms and conditions of the hypothecary loan 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 Questbank.
I/we am/are aware that due to this request, the maturity date will change accordingly to reflect

the aforementioned changes. This request constitutes a proposed amendment to the payment terms of the hypothecary loan and shall only take effect once accepted by Questbank. Except as expressly modified by such accepted change, all other terms and conditions of the hypothecary loan remain unchanged and in full force and effect.

I/we acknowledge having received the French version of this document before expressing my/our intention to contract exclusively in English. *Je reconnais / nous reconnaissons avoir reçu la version française du présent document avant d'avoir exprimé ma/notre volonté de contracter exclusivement en anglais.*

Signed this _____day of _____, 20__.

Signature: _____Signature (if applicable): _____

Borrower name (print):

_____

Borrower name (print, if applicable):

_____

Please email the fully completed and signed request form to **mortgageservicing@questbank.com**, or send it by mail to Questbank, Attention Mortgage Payments Department, 5700 Yonge St, 19th Floor, North York, ON, M2M 4K2.

Please note that we require this form to be returned within five business days prior to your requested payment date change for your request to be accommodated in time.

If you have any questions, please contact the Mortgage Payments Department at 1-888-403-8440.

Sincerely,

The Questbank team
E.& O.E.