



BROKER DEALER / RIA CHANGE REQUEST

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION

RMI Partner / Member #: _____

Acct / Investor Name: _____

Investor Address: _____

Investor Email: _____

Daytime Phone #: _____

Broker Dealer / RIA Firm: _____

Financial Advisor Name: _____

Branch Address: _____

Rep Phone #: _____

Rep Fax #: _____

Rep Email Address: _____

ALL TITLEHOLDER SIGNATURES ARE REQUIRED.

LP / Member / Investor Signature Date LP / Member / Investor Signature Date

Custodian Signature (if applicable) Date

WHEN COMPLETED SEND TO:

Redwood Mortgage
c/o Vistra USA LLC
PO Box 2609
San Rafael CA 94912-2609
Fax: 415-485-4553
VRM@Vistra.com