

Refinance Information Form

The information you provide below will be used to complete your request to refinance your current vehicle loan. Incomplete, incorrect, or illegible information may delay the processing of your loan request.

Borrower(s)			
Institution Name			
Payoff Address			
Account Number			
Vehicle Identification Number (VIN)		Vehicle Mileage	
10-Day Payoff Amount*	Payoff Good Through†		Daily Interest‡
*This is the amount required to completely payoff and plus the interest that will accrue over the next 10 day		nt must include the principa	l, accrued interest, and fees through today,
†The date the payoff amount is valid through.			
The dollar amount of interest that accrues on the loa	n daily.		
Please upload this document using the li secure delivery option and will ensure yo	•		•

fax this form to 508.263.6392.

Note: Email communication may not be secure. Please do not include personally identifying information such as your account or membership numbers in emails you send to us.