



FHA Case Number Transfer Request Form

FHA Case Number: _____

Property Address: _____

City: _____ State: _____ Zip Code: _____

Borrower's Name: _____

New Sponsor Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

FHA ID #: _____

New Originator's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

FHA ID #: _____

Broker/Originator's EIN #: _____ NMLS #: _____

Requester's Name: _____

Requester's Email Address: _____

BSM Direct Loan #: _____

Send Completed Form to: _____