

# CHANGE IN TERMS REQUEST FORM (INCLUDING THE "INTEREST RATE CONVERSION NOTICE")

Use this Change In Terms Request Form ("Form") when submitting a change in terms request for a securities-backed line of credit account ("SBLOC") or an insurance-backed line of credit account ("IBLOC") (individually and collectively referred to in this Form as "Line of Credit Account") provided by The Bancorp Bank, N.A. ("Bank" or "us"). The Form may be completed and then submitted to the Bank by the Account owner ("Borrower," "my," "you," or "your") or the Borrower's authorized financial professional, financial professional firm, financial advisor, life insurance agent, or broker (referred to in this Form as "Financial Professional"). All other defined terms used in this Form have the meanings assigned to them in the SBLOC Agreement and Additional Disclosures, whichever is applicable (each referred to in this Form as "Agreement").

A requested change in terms will not be effective until (a) Borrower (and all other loan parties as applicable), has executed and returned the loan documents required by the Bank; and (b) Bank confirms its approval of the requested change(s). Interest payments for the Line of Credit Account must be current or the change requested may be declined.

PART 1: Reque	estor
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Borrower Financial Professional

#### **PART 2: Account Information**

#### **Account Type**

Securities-Backed Line of Credit Insurance-Backed Line of Credit\*

Line of Credit Account Title

Line of Credit Account Number

## **PART 3: Change in Terms Requests**

Please complete the applicable section(s).

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A. Loan Amount Change	
Increase Line of Credit to:	Decrease Line of Credit to:
Increase Line of Credit to maximum amount based on eligible Collater	ral.
Purpose of Increase/Use of Funds	

Note: Neither an SBLOC nor IBLOC can be used for the purchase of additional securities or to pay off a margin loan that was used to purchase securities. If you have any questions about these limitations, please contact the Bank at 866.435.1370 before submitting your request for a change in terms.

<sup>\*</sup> No Line of Credit increase is permitted within one-hundred-eighty (180) calendar days of the loan origination date. Maximum number of Line of Credit increases is two (2) within a twelve-month period.

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#### B. Interest Rate Change Options

#### **Option 1: Interest Rate Conversion Notice**

NOTE: Please consult your Financial Professional to confirm a 36-month fixed rate is available for your Line of Credit Account.

Convert my Line of Credit Account from the existing variable rate to a 36-month fixed rate

Convert my Line of Credit Account from the existing 36-month fixed rate to a variable rate\*\*

Convert my Line of Credit Account from the existing 36-month fixed rate to a new 36-month fixed rate\*\*

\*\* A non-refundable fee of \$500.00 applies.

#### **Fee Payment Options:**

Please select one (1) of the following Fee payment options. Note: Fee will not be assessed until the 0	Change in Terms is approved and processed:
Initiate a one-time advance of \$500 from my Line of Credit Account.	
Make a one-time withdrawl of \$500 from my Bank deposit account. The deposit account number	er is:

Bill primary borrower. The fee will appear on your monthly statement.

I authorize the Bank to originate an Automated Clearing House (ACH) transfer of \$500 to the Bank from my deposit account at the financial institution identified below. (Please provide all requested information and sign below.)

Deposit Account Name	Deposit Account Number	Account Type	
Financial Institution Name	ABA Routing Number (Please verify the financial institution	n uses this number for A	CH transfers.)
Financial Institution Address	City	State	ZIP Code
I hereby certify that no authorization of any party other th contemplated by this authorization and that I am a Borrov identified above. I acknowledge that the origination of AC	ver on the Account with the Bank and an authorized s	igner on the account	
Signature of Borrower/Authorized Signer	Date (mm/dd/yyyy)		

#### **Option 2: Interest Rate Review**

Request interest rate review

Request custom interest rate (for a line of credit of \$1 million or more)

Note: Additional documentation may be required.

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#### C. Collateral Change

#### Securities-Backed Line of Credit

Note: Your request may not be approved if the registration of the pledged Securities Account and the titling of the SBLOC are different.

Additional Securities Account(s) to be pledged as Collateral (include any and all sub-accounts, if applicable):

Securities Account Number(s)

Securities Account Title

Remove pledged Securities Account(s) as Collateral:

Securities Account Number(s)

Securities Account Title

Replacement Securities Account(s) to be pledged as Collateral (attach additional page(s) if necessary):

Securities Account Number(s)

Securities Account Title

Securities Account Number(s)

Securities Account Title

#### Insurance-Backed Line of Credit

Note: Borrower must be the owner of the whole-life insurance policy. Policy must be issued by a Bank-approved insurance carrier. Consult a tax advisor before pledging a policy as Collateral.

Additional life insurance policy to be pledged as Collateral:

Life Insurance Company

Life Insurance Policy Number

Remove pledged life insurance policy as Collateral:

Life Insurance Company

Life Insurance Policy Number

Replacement life insurance policy to be pledged as Collateral (attach additional page(s) if necessary):

Life Insurance Company

Life Insurance Policy Number

Life Insurance Company

Life Insurance Policy Number

Note: Additions, reductions, or other collateral related changes may subject the loan to a different variable interest rate tier.

### D. Co-Borrower Change

Additional information may be required when removing or adding a co-borrower.

Option 1: Remove co-borrower

Name of co-borrower to be removed

Reason for removing co-borrower

Note: Removing a co-borrower from an SBLOC releases the co-borrower from all obligations to pay any debt (e.g., divorce, death)

Option 2: Add co-borrower

Name of co-borrower to be added

Name of co-borrower to be added

Note: If a co-borrower is added, the co-borrower may request an Advance in accordance with the Agreement and the Bank is entitled to rely on and will honor such request, in the Bank's sole and absolute discretion, without the consent of any other borrower.

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E. Appointment of Authorized Representation	(	
Please select one option below:		
Option 1: Attorney-in-Fact		
Name of attorney-in-fact	Reason for	the addition of an attorney-in-fact
Option 2: Authorized Representative		
Name of authorized representative	Reason for	the addition of an authorized representative
F. Trust Name Change		
Current name	New name	
Reason for name change		
G. Add and/or Remove Trustee(s)		
Name of Trustee(s) to be removed		
Name of Trustee(s) to be added		
A copy of the below documents may be requ	iired:	
Written resignation of Trustee(s)		
Written appointment of Successor Trus		
Written acceptance of Successor Truste		
H. Add and/or Remove Authorized Represe	ntative (Business Entity)	
Name of Authorized Representative to be remove	d Name of Au	uthorized Representative to be added
Note: If the existing authorized representativalong with the newly appointed representatival		esentatives will be required to sign the Bank's resolutions form
I. Partner Change		
Partner shall mean the firm to which the Bank	c provides an integrated cash management so	olution including branded and/or non-branded banking services.
Please complete this section if you will be sw	itching your Securities Account(s) held as Col	lateral for an SBLOC to a new firm partnered with the Bank.
Replace pledged Securities Account(	s) as Collateral due to change in Partner:	
Current partner to be removed	Securities Account Number	Securities Account Title
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J. Additional Information a	and/or Miscellane	ous Change	Request
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Use this section to provide any additional details regarding your request or to make a request that is not listed on this Form.

Additional details

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Financial Professional Name	Financial Professional Firm Name		
Email	Phone (include area code and extension)	_	
Address	City	State	ZIP Code

## PART 5: Signature(s)

#### Signature(s) Required

I am the Borrower for the Line of Credit Account identified in Part 2 or the authorized Financial Professional for the Line of Credit Account.

Signature of Borrower	Date (mm/dd/yyyy)
Print Borrower Name	
Signature of Authorized Financial Professional	Date (mm/dd/yyyy)
Print Authorized Financial Professional Name	Financial Professional Complete User ID (if applicable)

Please **mail** or **fax** this completed Form to:

The Bancorp Bank, N.A. Attn: Loan Department 409 Silverside Road, Suite 105 Wilmington, DE 19809

Fax: 302.791.5787 Phone: 866.435.1370