

135 Broad Street, Asheville, NC 28801 Phone: (828) 257-4949, Fax (828)257-4948 Email: allforms@AmericanIRA.com

## Note Modification Authorization



This form is to be completed if you wish to modify the terms of a promissory note.

1 Account Information	
Your Name:	Account Number:
2 Current Note Information	
Borrower's Name:	Loan Amount:
Loan Effective Date:/	Loan Effective Date:/
3 Borrower Contact Information	
Company Name/Individual Name:	Address:
Contact Person:	Phone:
4 Note Status: Extension Terms	
Please make sure that all applicable sections are completed to ensure complete and timely processing.  This note has been extended pursuant to the following terms (this section must be fully completed):	
New Maturity Date:/ Interest Rate:%	
Payment Terms:	
Payment Frequency: ☐Monthly ☐Quarterly ☐Annually ☐Other:	
Amount \$ □Interest Only □Interest & Principal	
New Property:	
5 Acknowledgement, Authorization, & Custodian Account Holder Signature	
I hereby acknowledge and confirm that I shall provide the Custodian and/or the Administrator the necessary supporting documentation within sixty (60) days from the funding of this investment from my Custodial Account. Failure to provide supporting documents within the sixty (60) day period may result in a distribution from my account. Such a distribution may result in fees and penalties. I further acknowledge that I am solely responsible for the investment updates I am making. I hold harmless, protect and indemnify the Custodian and/or Administrator from and against any and all liabilities, losses, damages, expenses and charges that the Custodian and/or Administrator arising from and/or related to this investment. NEITHER NEW VISION TRUST COMPANY, a state-chartered South Dakota Trust Company ("Custodian") nor AMERICAN IRA, LLC, a North Carolina limited liability company ("Administrator") have provided any legal or financial advice related to this or any other transaction(s) of my Custodial Account. I further acknowledge that I am solely responsible for the success or failure of this investment. I hereby authorized the update of the asset(s) listed above for my Custodial Account.	
By my signature below, I confirm that I have read and consent to the terms of this document and I further acknowledge that I have read and consent to the terms of the New Account Application, Custodial Agreement (Form 5305, 5305-A, 5305-SA, 5305-SEP, 5305-C or 5305-EA, as application, "collectively referred to as "5305" or 401K Plan Agreement ("Sponsored Plan") as applicable, Fee Schedule, Account Disclosure Statement and any other documents that govern my Custodial Account or Sponsored Plan, as such documents are currently written, or as they may be amended from time to time, (the "Documents"), which are incorporated by reference herein. (In the event of a conflict between the Documents and the 5305 and/or Sponsored Plan applicable to my Custodial Account, the 5305 or Sponsored Plan shall govern).  Account Holder Signature:  Date:	