

Request for Servicemembers Civil Relief Act (SCRA) Benefits

			Access No.	ess No.	
Name: First	Middle	Last	Suffix	Date of Birth (MM/DD/YY)	
Address: Street	City	State		Zip	
Branch of Service	Select One:	☐ Reservist ☐ National Gua	ard		
Date Orders Issued (MM/DD/YY)	Active Duty Start (MM/DD/YY)	Active Duty Release Date (MM/L	DD/YY)	Box for Indefinite	
1-800-531-7174, extensio	s for us to process your reques			our SCRA team a	
By eMessage: You can easily send us	a message from your Navy Fed se write: ATTN: SCRA, Mortgag	leral online account or me	-		
By Fax: 703-206-3108 ATTN: SCRA, Mortgage	e Servicing				
By Mail: Navy Federal Credit Un P.O. Box 3000 Merrifield, VA 22119 ATTN: SCRA, Mortgage					
Visit Your Local Brand A branch represenative	ch: will be happy to assist you in s	ubmitting your form and	or documents to S	SCRA.	