

Loan I.D. Number: _____

BORROWER	
Borrower's Name	
Social Security Number	Date of Birth
Home Phone Number with Area Code	
Cell or Work Number with Area Code	

CO-BORROWER	
Co-Borrower's Name	
Social Security Number	Date of Birth
Home Phone Number with Area Code	
Cell or Work Number with Area Code	

I want to:	<input type="checkbox"/> Keep the Property	<input type="checkbox"/> Sell the Property	
The Property is my:	<input type="checkbox"/> Primary Residence	<input type="checkbox"/> Second Home	<input type="checkbox"/> Investment
The Property is:	<input type="checkbox"/> Owner Occupied	<input type="checkbox"/> Renter Occupied	<input type="checkbox"/> Vacant

Mailing Address	
Property Address (if same as mailing address, just write "Same")	E-mail Address

<p>Is the property listed for sale? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you received an offer on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date of offer _____ Amount of offer \$ _____</p> <p>Agent's name _____</p> <p>Agent's Phone Number: _____</p> <p>For Sale by Owner? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Have you contacted a credit-counseling agency for help? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please complete the following:</p> <p>Counselor's Name: _____</p> <p>Agency Name: _____</p> <p>Counselor's Phone Number: _____</p> <p>Counselor's Email: _____</p>
<p>Who pays the real estate tax bill on your property?</p> <p><input type="checkbox"/> I do <input type="checkbox"/> Lender does <input type="checkbox"/> Paid by condo or HOA</p> <p>Are the taxes current? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Condominium or HOA Fees <input type="checkbox"/> Yes <input type="checkbox"/> No \$ _____</p> <p>Paid to: _____</p>	<p>Who pays the hazard insurance premium for your property?</p> <p><input type="checkbox"/> I do <input type="checkbox"/> Lender Does <input type="checkbox"/> Paid by Condo or HOA</p> <p>Is the policy current? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Name of Insurance co: _____</p> <p>Insurance Co. Tel # _____</p>

Have you filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes: <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 13 Filing Date: _____
Has your bankruptcy been discharged? <input type="checkbox"/> Yes <input type="checkbox"/> No Bankruptcy case number _____

Additional Liens/Mortgages or Judgments on this property:			
Lien Holder's Name/Service	Balance	Contact Number	Loan Number

HARDSHIP AFFIDAVIT

I am having difficulty making my monthly payment because of financial difficulties created by (check all that apply):

<input type="checkbox"/> My household income has been reduced. For example: unemployment, underemployment, reduced pay or hours, decline in business earnings.	<input type="checkbox"/> My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt.
<input type="checkbox"/> My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.	<input type="checkbox"/> My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.

<i>Monthly Household Expenses/Debt</i>		<i>Monthly Household Income</i>	
First Mortgage Payment	\$	Monthly Gross Wages	\$
Second Mortgage Payment	\$	Overtime	\$
Insurance	\$	Child Support/Alimony	\$
Property Taxes	\$	Social Security	\$
Cable TV, Internet, Movies	\$	Other monthly income from pensions, annuities or retirement plans	\$
Car Loan or Lease	\$	Tips, commissions, bonus and self-employed income	\$
Vehicle Fuel	\$	Rents Received	\$
Vehicle Insurance	\$	Other (investment income, royalties, interest, dividends, etc.)	\$
Cell Phone	\$	Total (Gross Income)	\$
Entertainment	\$	Additional Information	
Groceries	\$		
Health Care	\$		
Homeowners Association	\$		
Home Phone	\$		
Household: Furniture, Cleaning, Personal Items	\$		
Credit Card(s)	\$		
Utilities	\$		
Other	\$		
Total Debt/Expenses	\$		

ACKNOWLEDGEMENT AND AGREEMENT

I certify under penalty of perjury:

1. That all the information in this document is truthful and the event(s) identified on page 1 is/are accurate.
2. I understand that the Servicer or their agents may investigate the accuracy of my statements and may require me to provide supporting documentation. I also understand that knowingly submitting false information may violate Federal law.
3. I understand the Servicer may pull a current credit report on all borrowers obligated on the Note.
4. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this document, the servicer may cancel any Agreement and may pursue foreclosure on my home.
5. That my property is owner-occupied; I intend to reside in this property for the next twelve months; I have not received a condemnation notice; and there has been no change in the ownership of the Property since I signed the documents for the mortgage that I want to modify.
6. I am willing to provide all requested documents and to respond to all Servicer questions in a timely manner.
7. I understand that the Servicer will use the information in this document to evaluate my eligibility for assistance, but the Servicer is not obligated to offer me assistance based solely on the statements in this document.
8. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
9. I understand that the Servicer will collect and record personal information, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about account balances and activity. I understand and consent to the disclosure of my personal information and the terms of any Making Home Affordable Agreement by Servicer to (a) the U.S. Department of the Treasury, (b) Fannie Mae and Freddie Mac in connection with their responsibilities under the Homeowner Affordability and Stability Plan; (c) any investor, insurer, guarantor or servicer that owns, insures, guarantees or services my first lien or subordinate lien (if applicable) mortgage loan(s); (d) companies that perform support services in conjunction with Making Home Affordable; and (e) any HUD-certified housing counselor.

Borrower Signature

Date

Co-Borrower Signature

Date