Hardship Affidavit Form

Name:	
Address:	
Loan Numb	er:
Use this form to tell us why it's difficult for you to make your current mortgage payments. In addition please provide a written explanation with this request describing the specific nature of your hardship.	
	requesting review of my/our current financial situation to determine whether I/we aporary or permanent mortgage relief options.
Date hardship	began is:
I believe that	my/our situation is:
M	nort-term (less than 6 months) ledium-term (6-12 months) ong-term or Permanent Hardship (greater than 12 months)
	e requesting review under the Making Home Affordable Program. I am/We are lty making my/our monthly payment because of financial difficulties created by apply):
1.	My/Our household income has been reduced. For example: reduced pay or hours, decline in business earnings, death, disability or divorce of a borrower or co-borrower.
2.	My/Our monthly debt payments are excessive and I am/We are overextended with my/our creditors. Debt includes credit cards, home equity or other debt.
3. 🗆	My/Our expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.
4.	My/Our cash reserves, including all liquid assets, are insufficient to maintain my/our current mortgage payment and cover basic living expenses at the same time.
5. □	I am/We are unemployed and (a) receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.
6.	Other

<i>,</i> •	How many single family properties other than your principal residence do you and/or any co-borrower(s) own individually, jointly, or with others?
8.	Has the mortgage on your principal residence ever had a Home Affordable Modification Program (HAMP) trial period plan or permanent modification? Yes No
9.	Has the mortgage on any other property that you or any co-borrower own had a permanent HAMP modification?