

Uniform Borrower Assistance Form

If you are experiencing a temporary or long-term hardship and need help, you must complete and submit this form along with other required documentation to be considered for available solutions. On this page, you must disclose information about (1) you and your intentions to either keep or transition out of your home; (2) information on the property's status; (3) real estate taxes; (4) homeowner's insurance premiums; (5) bankruptcy; (6) your credit counseling agency, and (7) information concerning other liens, if any, on your property.

On Page 2, you must disclose information about **all** of your income, expenses, and assets. Page 3 also lists the required income documentation that you must submit in support of your request for assistance. Then on Page 4, you must complete the Hardship Affidavit in which you disclose the nature of your hardship. It also tells you the required documentation that you must submit in support of your hardship claim.

NOTICE: In addition, when you sign and date this form, you will make important certifications, representations, and agreements, including certifying that all of the information in this Borrower Assistance Form is accurate and truthful and any identified hardship has contributed to your submission of this request for mortgage relief.

REMINDER: The Borrower Response Package you need to return consists of (1) this completed, signed, and dated Borrower Assistance Form; (2) completed and signed IRS Form 4506T-EZ (4506-T for self-employed borrowers or borrowers with rental income); (3) required income documentation, and (4) required hardship documentation.

I want to: Keep the property Vacate the property Sell the property Undecided

The property is currently: My primary residence A second home An investment property

The property is currently: Owner occupied Renter occupied Vacant

BORROWER	CO-BORROWER
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Borrower's Name: _____	Co-Borrower's Name: _____
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Social security number: _____	Date of birth: _____	No. of dependents: _____	Social security number: _____	Date of birth: _____	No. of dependents: _____
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Home phone number with area code: _____	Home phone number with area code: _____
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Cell or work number with area code: _____	Cell or work number with area code: _____
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Start Date with Current Employer: _____	Start Date with Current Employer: _____
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Mailing address: _____

Property address (if same as mailing address, just write SAME): _____	Email: _____
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Is the property listed for sale? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: What was the listing date? _____ Have you received an offer on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No Date of offer: _____ Amount of offer: \$ _____ Agent's name/phone number: _____ _____ Is the property for sale by owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you contacted a credit counseling agency for help? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Counselor's name: _____ Agency's name: _____ Counselor's phone number: _____ Counselor's email: _____ _____
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Do you have condominium or homeowners association (HOA) fees? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Total monthly amount: \$ _____ Amount Past Due: \$ _____ Name and address fees are paid to: _____ _____	Have you filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 Filing date: _____ Has your bankruptcy been discharged? <input type="checkbox"/> Yes <input type="checkbox"/> No Bankruptcy case number: _____
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Is any borrower an active duty service member? Yes No
 Is any borrower the spouse or dependent of an active duty service member? Yes No
 Has any borrower been deployed away from his/her primary residence or recently received a Permanent Change of Station order? Yes No
 Is any borrower the surviving spouse of a deceased service member who was on active duty at the time of death? Yes No
 Is any borrower a dependent of a deceased service member who was on active duty at the time of death? Yes No

Monthly Household Income		Household Assets (associated with the property and/or borrower(s) excluding retirement funds)	
Monthly gross wages	\$	Checking account(s)	\$
Overtime	\$	Checking account(s)	\$
Child support/alimony*	\$	Savings/money market	\$
Non-taxable social security/SSDI	\$	CDs	\$
Taxable SS benefits or other monthly income from annuities or retirement plans	\$	Stocks/bonds	\$
Tips, commissions, bonus, and self-employed	\$	Other cash on hand	\$
Rents received	\$	Other real estate (estimated value)	\$
Unemployment income	\$	Other	\$
Food stamps/welfare	\$	_____	\$
Other	\$	Other	\$
_____	\$	_____	\$
Total (gross income)	\$	Total (assets)	\$

MONTHLY HOUSEHOLD EXPENSES/DEBT

Monthly Debt Expenses		Monthly Household Expenses			
First mortgage payment	\$	Cable	\$	Tuition	\$
Second mortgage payment	\$	Bankruptcy trustee payments	\$	Gas / fuel / oil for vehicle	\$
Homeowner's Insurance	\$	Bus / transit / parking	\$	Ground rent / land lease	\$
Property taxes	\$	Internet	\$	Health insurance	\$
Credit cards / installment loans (total minimum payment / mo.)	\$	Charitable giving	\$	Medical bills	\$
Car lease payments	\$	Child care	\$	Life insurance	\$
HOA/condo fees/property maintenance	\$	Clothes	\$	Prescriptions	\$
Mortgage payments on other properties	\$	Entertainment	\$	Phones (land and/or cell)	\$
Alimony payments	\$	Legal / court costs	\$	Food	\$
Child support payments	\$	Tax payments	\$	Gas / electricity / fuel oil / water / sewer / garbage	\$
Other	\$	Vehicle insurance	\$	Other	\$
_____	\$	_____	\$	_____	\$
Total (debt expenses)	\$	Total (household expenses)			\$

Loan Number: _____

If subordinate lien(s) or any other lien(s) exist on the subject property, please enter information on the lien(s) below:			
Lien holder's name:	Balance/interest rate:	Loan number:	Lien holder's phone number:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REQUIRED INCOME DOCUMENTATION

<input type="checkbox"/> Do you earn a salary or hourly wage? For each borrower who is a salaried employee or paid by the hour, include the most recent pay stub(s) that covers at least 30 (consecutive) days of earnings and reflects year-to-date earnings. If not reported on the pay stub(s), alternative documentation reflecting year-to-date earnings is required (i.e., signed letter or printout from employer).	<input type="checkbox"/> Are you self-employed? For each borrower who receives self-employed income, include a complete, signed individual federal income tax return and, as applicable, the business tax return; AND either the most recent signed and dated quarterly or year-to-date profit/loss statement that reflects activity for the most recent three months; OR copies of bank statements for the business account for the last two months evidencing continuation of business activity.
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Do you have any additional sources of income? Provide for each borrower as applicable:

“Other Earned Income” such as bonuses, commissions, housing allowance, tips, or overtime:

Reliable third-party documentation describing the nature of the income (e.g., pay stubs, employment contract, or printouts documenting tip income).

Social Security, disability or death benefits, pension, public assistance, or adoption assistance:

Documentation showing the amount and frequency of the benefits, such as letters, exhibits, disability policy, or benefits statement from the provider, and

Documentation showing the receipt of payment, such as copies of the two most recent bank statements showing deposit amounts.

Rental income:

Copy of the most recent filed federal tax return with all schedules, including Schedule E—Supplemental Income and Loss. Rental income for qualifying purposes will be 75% of the gross rent reduced by the monthly debt service on the property, if applicable; or

If rental income is not reported on Schedule E – Supplemental Income and Loss, provide a copy of the current lease agreement with either bank statements or cancelled rent checks demonstrating receipt of rent.

Investment income:

Copies of the two most recent investment statements or bank statements supporting receipt of this income.

Alimony, child support, or separation maintenance payments as qualifying income:*

Copy of divorce decree, separation agreement, or other written legal agreement filed with a court, or court decree that states the amount of the alimony, child support, or separation maintenance payments and the period of time over which the payments will be received, and

Copies of your two most recent bank statements or other third-party documents showing receipt of payment.

***Notice:** Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered for repaying this loan.

HARDSHIP AFFIDAVIT

I am requesting review of my current financial situation to determine whether I qualify for temporary or permanent mortgage relief options.

Date hardship began: _____

Has your hardship ended? No Yes If yes, what date was it resolved? _____

My hardship situation is:

- Short term (less than 6 months) Medium term (6 – 12 months) Long term or permanent (more than 12 months)

I am having difficulty making my monthly mortgage payment because of the reason checked below. (Please check the primary reason and submit the required documentation demonstrating your primary hardship.)

If your hardship is:	Then the required hardship documentation is:
<input type="checkbox"/> Unemployment	<input type="checkbox"/> No hardship documentation required
<input type="checkbox"/> Increase in housing expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control	<input type="checkbox"/> No hardship documentation required
<input type="checkbox"/> Income reduction: a hardship that has caused a decrease in income due to circumstances outside your control (e.g., elimination of overtime, reduction in regular working hours, or a reduction in base pay)	<input type="checkbox"/> No hardship documentation required
<input type="checkbox"/> Divorce or legal separation; separation of borrowers unrelated by marriage, civil union, or similar domestic partnership under applicable law	<input type="checkbox"/> Divorce decree signed by the court OR <input type="checkbox"/> Separation agreement signed by the court OR <input type="checkbox"/> Current credit report evidencing divorce, separation, or non-occupying borrower has a different address OR <input type="checkbox"/> Recorded quitclaim deed evidencing that the non-occupying borrower or co-borrower has relinquished rights to the property
<input type="checkbox"/> Death of a borrower or death of either the primary or secondary wage earner in the household	<input type="checkbox"/> Death certificate OR <input type="checkbox"/> Obituary or newspaper article reporting the death
<input type="checkbox"/> Long-term or permanent disability; serious illness of a borrower / co-borrower or dependent family member	<input type="checkbox"/> Written statement or other documentation verifying disability or illness OR <input type="checkbox"/> Doctor's certificate of illness or disability OR <input type="checkbox"/> Medical bills OR <input type="checkbox"/> Proof of monthly insurance benefits or government assistance, if applicable
<input type="checkbox"/> Disaster (natural or man-made) adversely impacting the property or borrower's place of employment	<input type="checkbox"/> Insurance claim OR <input type="checkbox"/> Federal Emergency Management Agency grant or Small Business Administration loan OR <input type="checkbox"/> Borrower or employer property located in a federally declared disaster area

HARDSHIP AFFIDAVIT (continued)

Distant employment transfer / relocation

For active-duty service members:

Notice of Permanent Change of Station (PCS) or actual PCS orders.

For employment transfers / new employment:

Documentation that reflects the amount of relocation assistance provided, if applicable, AND

Copy of signed offer letter or notice from employer showing transfer to a new employment location OR

Pay stub from new employer OR

If none of these applies, provide a written explanation.

Business failure

Tax return from the previous year (including all schedules) AND

Proof of business failure supported by one of the following:

- Bankruptcy filing for the business; or
- Two months recent bank statements for the business account evidencing cessation of business activity; or
- Most recent signed and dated quarterly or year-to-date profit and loss statement

Other (a hardship that is not covered above). Brief explanation of my hardship:

BORROWER/CO-BORROWER ACKNOWLEDGEMENT AND AGREEMENT

I certify, acknowledge, and agree to the following:

1. All of the information in this Borrower Assistance Form is truthful and the hardship that I have identified contributed to my need for mortgage relief.
2. The accuracy of my statements may be reviewed by the Servicer, owner or guarantor of my mortgage, their agent(s), or an authorized third party*, and I may be required to provide additional supporting documentation. I will provide all requested documents and will respond timely to all Servicer, or authorized third party*, communications.
3. Knowingly submitting false information may violate Federal and other applicable law.
4. If I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this request for mortgage relief or if I do not provide all required documentation, the Servicer may cancel any mortgage relief granted and may pursue foreclosure on my home and/or pursue any available legal remedies.
5. The Servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
6. I may be eligible for a trial period plan, repayment plan, or forbearance plan. If I am eligible for one of these plans, I agree that:
 - a. All the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as if set forth in such plan in full.
 - b. My first timely payment under the plan will serve as acceptance of the terms set forth in the notice of the plan sent by the Servicer.
 - c. The Servicer’s acceptance of any payments under the plan will not be a waiver of any acceleration of my loan or foreclosure action that has occurred and will not cure my default unless such payments are sufficient to completely cure my entire default under my loan.
 - d. Payments due under a trial period plan for a modification will contain escrow amounts. If I was not previously required to pay escrow amounts, and my trial period plan contains escrow amounts, I agree to the establishment of an escrow account and agree that any prior waiver is revoked. Payments due under a repayment plan or forbearance plan may or may not contain escrow amounts. If I was not previously required to pay escrow amounts and my repayment plan or forbearance plan contains escrow amounts, I agree to the establishment of an escrow account and agree that any prior escrow waiver is revoked.
7. A condemnation notice has not been issued for the property.
8. The Servicer or authorized third party* will obtain a current credit report on all borrowers obligated on the Note.
9. The Servicer or authorized third party* will collect and record personal information that I submit in this Borrower Response Package and during the evaluation process. This personal information may include, but is not limited to: (a) my name, address, telephone number, (b) my social security number, (c) my credit score, (d) my income, and (e) my payment history and information about my account balances and activity. I understand and consent to the Servicer or authorized third party*, as well as any investor or guarantor (such as Fannie Mae or Freddie Mac), disclosing my personal information and the terms of any relief or foreclosure alternative that I receive to the following:
 - a. Any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services my first lien or subordinate lien (if applicable) mortgage loan(s) or any companies that perform support services to them; and
 - b. The U.S. Department of Treasury, Fannie Mae, and Freddie Mac, in conjunction with their responsibilities under the Making Home Affordable program, my state’s Hardest Hit Funds agency (if applicable), or any companies that perform support services to them.
10. I consent to being contacted concerning this request for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the Servicer or authorized third party*. By checking this box , I also consent to being contacted by text messaging.

*An authorized third party may include, but is not limited to, a counseling agency, Housing Finance Agency (HFA), or other similar entity that is assisting me in obtaining a foreclosure prevention alternative.

Borrower signature:	Date:	Co-Borrower signature:	Date:
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