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) the property's status; (3) bankruptcy; and (4) your credit counseling agency. On Page 2, you must disclose information about all of your income, expenses and assets. Page 2 also lists the required income documentation that you must submit in support of your request for assistance. Then on Page 3, you must complete the Hardship Affidavit in which you disclose the nature of your hardship. The Hardship Affidavit informs you of 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 (4506T for self-employed borrowers or borrowers with rental income); (3) required income documentation; and (4) required hardship documentation. **Loan Number** (usually found on your monthly mortgage statement) Servicer's Name Undecided Keep the Property Vacate the Property Sell the Property I want to: My Primary Residence A Second Home An Investment Property The property is currently: Vacant Renter Occupied **BORROWER CO-BORROWER** BORROWER'S NAME **CO-BORROWER'S NAME** SOCIAL SECURITY NUMBER DATE OF BIRTH SOCIAL SECURITY NUMBER DATE OF BIRTH HOME PHONE NUMBER WITH AREA CODE HOME PHONE NUMBER WITH AREA CODE CELL OR WORK NUMBER WITH AREA CODE CELL OR WORK NUMBER WITH AREA CODE MAILING ADDRESS PROPERTY ADDRESS (IF SAME AS MAILING ADDRESS, JUST WRITE SAME) **EMAIL ADDRESS** Is the property listed for sale? Have you contacted a credit counseling agency for help? If yes, what was the listing date? If yes, please complete the counselor contact information below: If property has been listed for sale, have you received an offer on the property? ∐Yes ∐No Counselor's Name: __ Date of offer: ___ Amount of Offer: \$ _____ Agency's Name: Agent's Name: __ Counselor's Phone Number: Agent's Phone Number: Counselor's Email Address: _ For Sale by Owner? Do you have condominium or homeowner association (HOA) fees? ∏Yes ∏No Total monthly amount: \$ Name and address that fees are paid to: Chapter 12 Chapter 13 Have you filed for bankruptcy? ☐ Yes No Chapter 7 Chapter 11 If yes: If yes, what is the filing Date: _____ Has your bankruptcy been discharged? Yes □No Bankruptcy case number: _

Is any Borrower an active duty service member?

Has any Borrower been deployed away from his/her primary residence or received a Permanent Change of Station order?

Is any Borrower the surviving spouse of a deceased service member who was on active duty at the time of death?

□No

☐ No

∏No

☐ Yes

Yes

☐ Yes

	E FORM Monthly Househo	old Expense	es and Deh	t Househo	ld Assets (associa	ated with the
Monthly Household Income			.s and Dec		property and/or borrower(s)excluding retirement funds)	
\$	First Mortgage Payment	\$	Checking Acco	Checking Account(s) \$		
\$	Second Mortgage Paymen	\$	Checking Acco	unt(s)	\$	
\$	Homeowner's Insurance		\$	Savings / Mone	ey Market	\$
\$	Property Taxes		\$	CDs	CDs	
\$			\$	Stocks / Bonds	Stocks / Bonds \$	
\$	Alimony, child support pay	\$	Other Cash on	Hand	\$	
\$	Car Lease Payments		\$	Other Real Esta	ate (estimated value)	\$
\$	HOA/Condo Fees/Property	y Maintenance	\$	Other		\$
\$	Mortgage Payments on ot	her properties	\$			\$
\$	Other		\$			\$
\$	·	s and Debt	\$	Total Assets		\$
echanics lie						
Balance	e and Interest Rate	Loan Nu	mber		Lien Holder's Phone	e Number
/ wage?	☐ Are you sel	lf-employed?				
stub(s) refle and docur gs, if not rep	ecting the individual formentation either the roorted that reflect	ederal income most recent si s activity for t	e tax return a gned and da the most rece	and, as applicabl ted quarterly or ent three month	e, the business tax re year-to-date profit/I s; OR copies of bank	eturn; AND oss statement statements for
n as bonuse umentation e). death beno g the amour	s, commissions, housing all describing the amount and efits, pension, public assist and frequency of the beauting and frequenc	llowance, tips d nature of th tance, or adop nefits, such as	s, or overtime e income (e. prion assista s letters, exhi	g., paystub, emp nce: ibits, disability p	olicy or benefits state	ement from the
be 75% of teported on seelled rent o	the gross rent you reported Schedule E – Supplemental Checks demonstrating receins Stment statements or bank	I reduced by t I Income and ipt of rent.	the monthly of Loss, provide supporting re	debt service on t e a copy of the co	the property, if applic furrent lease agreeme	cable; or
	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ First Mortgage Payment \$ Second Mortgage Payment \$ Homeowner's Insurance \$ Property Taxes \$ Credit Cards / Installment minimum payment per mode. \$ Alimony, child support payments \$ HOA/Condo Fees/Property \$ Mortgage Payments on ot \$ Other \$ Total Household Expense Payments Echanics liens, tax liens, etc.) Balance and Interest Rate Required Incompayments Total Household Expense Payments Echanics liens, tax liens, etc.) Balance and Interest Rate Required Incompayments Total Household Expense Payments Echanics liens, tax liens, etc.) Balance and Interest Rate Are you sell for each both individual for either the rest that reflect the business activity. Fources of income? Provide for each both as bonuses, commissions, housing all mentation describing the amount and continuous activity. Burces of income? Provide for each both as bonuses, commissions, housing all mentation describing the amount and continuous activity. Burces of income? Provide for each both as bonuses, commissions, housing all mentation describing the amount and continuous activity. Fources of income? Provide for each both as bonuses, commissions, housing all mentation describing the amount and continuous activity. Fources of income? Provide for each both activity.	\$ First Mortgage Payment \$ Second Mortgage Payment \$ Homeowner's Insurance \$ Property Taxes \$ Credit Cards / Installment Loan(s) (total minimum payment per month) \$ Alimony, child support payments* \$ Loar Lease Payments \$ HOA/Condo Fees/Property Maintenance \$ Mortgage Payments on other properties \$ Other \$ Total Household Expenses and Debt Payments Exchanics liens, tax liens, etc.) Balance and Interest Rate Required Income Docume Payments Total Household Expenses and Debt Payments Chanics liens, tax liens, etc.) Required Income Docume Payments Total Household Expenses and Debt Payments Chanics liens, tax liens, etc.) Balance and Interest Rate Coan Nu Are you self-employed? For each borrower who individual federal income either the most recent singuity in the business account for activity. Cources of income? Provide for each borrower as applies as bonuses, commissions, housing allowance, tips are bonuses, commissions, housing allowance, tips are bonuses, commissions, public assistance, or adough the amount and frequency of the benefits, such as the receipt of payment, such as copies of the two filed federal tax return with all schedules, including the provided reduced by the provided on Schedule E — Supplemental Income and celled rent checks demonstrating receipt of rent.	S First Mortgage Payment S	Payments Property	Payments First Mortgage Payment Second Mortgage Payment Loan(s) (total Second Mortgage Payment per month) Second Lease Payments Second

For all first lien mortgage accounts: You have the right to receive a copy of all written appraisals or valuations developed in connection with a loan modification application.

UNIFORM BORROWER ASSISTANCE FORM									
HARDSHIP AFFIDAVIT									
opti	ons. Date Hardship Began is:	uatio	n to determine whether I qualify for temporary or permanent mortgage loan relief						
	believe that my situation is:								
I am having difficulty making my monthly payment because of reason set forth below:									
(Please check the primary reason and submit required documentation demonstrating your primary hardship)									
If Y	our Hardship is:	The	n the Required Hardship Documentation is:						
П	Unemployment		No hardship documentation required						
	Reduction in Income: a hardship that		No hardship documentation required						
	has caused a decrease in your income	ш	To hardship documentation required						
	due to circumstances outside your								
	control (e.g., elimination of overtime,								
	reduction in regular working hours, a								
	reduction in base pay)								
	Increase in Housing Expenses: a		No hardship documentation required						
	hardship that has caused an increase in								
	your housing expenses due to								
]	circumstances outside your control								
Ш	Divorce or legal separation; separation	님	Divorce decree signed by the court; OR						
	of Borrowers unrelated by marriage, civil union or similar domestic		Separation agreement signed by the court; OR						
		Ш	Current credit report evidencing divorce, separation, or non-occupying borrower has a different address; OR						
	partnership under applicable law		Recorded quitclaim deed evidencing that the non-occupying Borrower or co-						
		Ш	Borrower has relinquished all rights to the property						
П	Death of a borrower or death of either	П	Death certificate; OR						
_	the primary or secondary wage earner		Obituary or newspaper article reporting the death						
	in the household								
	Long-term or permanent disability;		Proof of monthly insurance benefits or government assistance (if applicable); OR						
	Serious illness of a borrower/co-		Written statement or other documentation verifying disability or illness; OR						
	borrower or dependent family member		Doctor's certificate of illness or disability; OR						
		Ш	Medical bills						
_	Discrete of fractional an area or areada)	None	of the above shall require providing detailed medical information.						
Ш	Disaster (natural or man-made)		Insurance claim; OR Fodoral Emergency Management Agency grant or Small Rusiness Administration						
	adversely impacting the property or Borrower's place of employment		Federal Emergency Management Agency grant or Small Business Administration loan; OR						
	borrower spiace or employment	П	Borrower or Employer property located in a federally declared disaster area						
П	Distant employment transfer / Relocation	For a	ctive duty service members: Notice of Permanent Change of Station (PCS) or						
_	, ,		l PCS orders.						
		For e	mployment transfers/new employment:						
			Copy of signed offer letter or notice from employer showing transfer to a new						
			employment location; OR						
			Pay stub from new employer						
		In addition to the above, documentation that reflects the amount of any assistance provided, if applicable (not required for those with PCS orders							
	Business Failure		Tax return from the previous year (including all schedules) AND						
		Ħ	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						
	Other: a hardship that is not covered		statement Written explanation describing the details of the hardship and relevant						
Ш	above		documentation						

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, or any companies that perform support services to them.

	checking this box, I also consent to being contacted by text messaging.		Borrower Signature	 Date	Co-Borrower Signature	 Date
mobile telephone number, or email address I have provided to the Lender/Servicer/ or authorized third party*. B		10.	I consent to being contacted concern	ning this reques	st for mortgage assistance at any teleph	one number, including

^{*}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.