

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 (4506T for self-employed borrowers or borrowers with rental income); (3) required income documentation, and (4) required hardship documentation.

I want to:	<input checked="" type="checkbox"/> Keep the Property	<input type="checkbox"/> Vacate the Property	<input type="checkbox"/> Sell the Property	<input type="checkbox"/> Undecided
The property is currently:	<input checked="" type="checkbox"/> My Primary Residence	<input type="checkbox"/> A Second Home	<input type="checkbox"/> An Investment Property	
The property is currently:	<input checked="" type="checkbox"/> Owner Occupied	<input type="checkbox"/> Renter occupied	<input type="checkbox"/> Vacant	

BORROWER			CO-BORROWER		
BORROWER'S NAME: John Loan Mod			CO-BORROWER'S NAME: Jane Smith		
SOCIAL SECURITY NUMBER 678 - 68 - 8767	DATE OF BIRTH Sep 12, 1978	NO. OF DEPENDENTS:	SOCIAL SECURITY NUMBER 678 - 68 - 8767	DATE OF BIRTH Sep 20, 1978	NO. OF DEPENDENTS:
HOME PHONE NUMBER WITH AREA CODE (342) 534 - 3425			HOME PHONE NUMBER WITH AREA CODE (523) 453 - 2534		
CELL OR WORK NUMBER WITH AREA CODE (305) 606 - 2360			CELL OR WORK NUMBER WITH AREA CODE (234) 324 - 3243		
MAILING ADDRESS 1111 1st St, New Roads, LA 12121.					
PROPERTY ADDRESS (IF SAME AS MAILING ADDRESS, JUST WRITE SAME) 1111 1st St, New Roads, LA 12121.				EMAIL ADDRESS craig@pixelfusion.com	

<p>Is the property listed for sale? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p>what was the listing date? _____</p> <p>Have you received an offer on the property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Date of offer: _____</p> <p>Amount of Offer: \$ 0.00</p> <p>Agent's Name: _____</p> <p>Agent's Phone Number: _____</p> <p>Is the property for sale by owner? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Have you contacted a credit-counseling agency for help? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p>Counselor's Name: John SMoth</p> <p>Agency's Name: _____</p> <p>Counselor's Phone Number: (987) 897 - 9879 Ext 89789</p> <p>Counselor's Email Address: john@counselor.com</p> <p>_____</p>
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<p>Do you have condominium or homeowner association (HOA) fees? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes: Total monthly amount: \$ 100.00</p> <p>Amount Past Due: \$ _____</p> <p>Name and address fees are paid to: _____</p> <p>_____</p>	<p>Have you filed for bankruptcy? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes:</p> <p><input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13</p> <p>Filing date: _____</p> <p>Has your bankruptcy been discharged? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Bankruptcy case number: _____</p>
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Is any borrower an active duty service member?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is any borrower the spouse or dependent of an active duty service member?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has any borrower been deployed away from his/her primary residence or recently received a Permanent Change of Station order?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is any borrower the surviving spouse of a deceased service member who was on active duty at the time of death?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is any borrower a dependent of a deceased service member who was on active duty at the time of death?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Monthly Household Income		Household Assets (associated with the property and/or borrower(s))	
Gross wages	\$4,400.00	Checking Account(s)	\$3,400.00
Overtime	\$0	Checking Account(s)	\$
Child Support / Alimony*	\$0	Savings / Money Market	\$1,000.00
Non-taxable social security/SSDI	\$0	CDs	\$
Taxable SS benefits or other monthly income from annuities or retirement plans	\$0	Stocks / Bonds	\$0
Tips, commissions, bonus and self-employed income	\$0	Other Cash on Hand	\$200.00
Rents Received	\$0	Other Real Estate (estimated value)	\$0
Unemployment Income	\$0	Other _____	\$374,000.00
Food Stamps/Welfare	\$0		
Other _____	\$0		
Total (Gross income)	\$4,400.00	Total (assets)	\$378,600.00

MONTHLY HOUSEHOLD EXPENSES/DEBT					
Monthly Debt Expenses		Monthly Household Expenses			
First mortgage payment	\$1,872.96	Cable	\$50.00	Tuition	\$0
Second mortgage payment	\$0	Bankruptcy trustee payments	\$	Gas / fuel / oil for vehicle	\$
Homeowner's Insurance	\$237.11	Bus / transit / parking	\$0	Ground rent / land lease	\$
Property taxes	\$110.00	Internet	\$0	Health insurance	\$150.00
Credit cards / installment loans (total minimum payment / mo.)	\$325.00	Charitable giving	\$0	Medical bills	\$0
Car lease payments	\$125.00	Child care	\$155.00	Life insurance	\$
HOA/condo fees/property maintenance	\$100.00	Clothes	\$0	Prescriptions	\$
Mortgage payments on other properties	\$0	Entertainment	\$325.00	Phones (land and/or cell)	\$0
Alimony payments		Legal / court costs	\$	Food	\$0
Child support payments	\$0	Tax payments	\$	Gas / electricity / fuel oil / water / sewer / garbage	\$0
Other	\$0	Vehicle insurance	\$350.00	Other	\$0
Total (debt expenses)		Total (household expenses)			\$3,800.07

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 and Interest Rate:	Loan Number:	Lien Holder's Phone Number:
_____	0.00/1.000	_____	
_____	/		
_____	/		

REQUIRED INCOME DOCUMENTATION

<input checked="" type="checkbox"/> Do you earn a salary or hourly wage? For each borrower who is a salaried employee or paid by the hour, include paystub(s) reflecting the most recent 30 days' earnings and documentation reflecting year-to-date earnings, if not reported on the paystubs (e.g. 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 amount and nature of the income (e.g., 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-Supplement Income and Loss. Rental income for qualifying purposes will be 75% of the gross rent you reported 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 is: **May 10, 2012**

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

My hardship situation is:

Short-term (under 6 months) Medium-term (6-12 months) Long-term or Permanent (greater than 12 months)

I am having difficulty making my monthly payment because of reasons set forth below:
(Please check all that apply and submit required documentation demonstrating your hardship)

If Your Hardship is:	Then the Required Hardship Documentation is:
<input type="checkbox"/> Unemployment	<input type="checkbox"/> No hardship documentation required
<input checked="" type="checkbox"/> Reduction in Income: a hardship that has caused a decrease in your income due to circumstances outside your control (e.g., elimination of overtime, reduction in regular working hours, a reduction in base pay)	<input type="checkbox"/> No hardship documentation required
<input checked="" 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 checked="" 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 all 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"/> 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
<input type="checkbox"/> Distant employment transfer / Relocation	<p>For active-duty service members: Notice of Permanent Change of Station (PCS) or actual PCS orders.</p> <p>For employment transfers/new employment:</p> <input type="checkbox"/> Copy of signed offer letter or notice from employer showing transfer to a new employment location; OR <input type="checkbox"/> Pay stub from new employer; OR <input type="checkbox"/> If none of these apply, provide written explanation In addition to the above, documentation that reflects the amount of any relocation assistance provided, if applicable (not required for those with PCS orders).
<input type="checkbox"/> Business Failure	<input type="checkbox"/> Tax return from the previous year (including all schedules) AND <input type="checkbox"/> Proof of business failure supported by one of the following: <ul style="list-style-type: none"> • 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
<input type="checkbox"/> Other: a hardship that is not covered above	<input type="checkbox"/> Written explanation describing the details of the hardship and relevant 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.
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 Lender/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