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: 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 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? Yes Have you contacted a credit counseling agency for help? □No If yes, what was the listing date? If property has been listed for sale, have you received an offer on the If yes, please complete the counselor contact information below: 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: Yes No For Sale by Owner? Do you have condominium or homeowner association (HOA) fees? □No Total monthly amount: \$ Name and address that fees are paid to: Have you filed for bankruptcy? ☐ Yes ☐ No Chapter 7 Chapter 11 Chapter 12 Chapter 13 If yes: If yes, what is the filing Date: _____ Has your bankruptcy been discharged? Tes ☐ No Bankruptcy case number: Is any Borrower an active duty service member? ∐ No Yes Has any Borrower been deployed away from his/her primary residence or 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? ☐ No Yes

UNIFORM BORROWER AS	SSISTANCE	FORM						
Monthly Household Income		Mon	Monthly Household Expenses and Debt Payments			Household Assets (associated with the property and/or borrower(s)excluding retirement funds)		
Gross wages	\$	First M	ortgage Payment		\$	Checking Accou	unt(s)	\$
Overtime	\$	Second	Second Mortgage Payment		\$	Checking Account(s)		\$
Child Support / Alimony*	\$	Homed	Homeowner's Insurance		\$		Savings / Money Market	
Non-taxable social security/SSDI	\$	Proper	Property Taxes		\$	CDs		\$
Taxable SS benefits or other monthly	\$	Credit (Credit Cards / Installment Loa		\$	Stocks / Bonds		\$
income from annuities or retirement		minimu	minimum payment per month					
plans								
Tips, commissions, bonus and self-	\$	Alimon	Alimony, child support payme		\$	Other Cash on	Hand	\$
employed income			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Rents Received	\$	Car Lea	Car Lease Payments		\$	Other Real Estate (estimated value)		\$
Unemployment Income	\$	HOA/C	HOA/Condo Fees/Property Mai		\$	Other		\$
Food Stamps/Welfare	\$	Mortga	Mortgage Payments on other		\$			\$
Other	\$	Other	-		\$			\$
Total (Gross income)	Ś	Total I	Total Household Expenses and Payments		\$	Total Assets		\$
, ,					ľ			
Any other liens (mortgage liens, m	echanics liens	, tax liens	s, etc.)		•			•
Lien Holder's Name Balance and			Interest Rate Loan Nur		nber Li		Lien Holder's Phone Number	
		р		Dogues	antation			
		N	Required Income		entation			
Do you earn a salary or hourl For each borrower who is a sa paid by the hour, include pays most recent 30 days' earnings reflecting year-to-date earnin on the paystubs (e.g. signed le from employer).	ing the ntation rted	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						
Do you have any additional s	ources of inco	me? Pro	vide for each borro	wer as app	olicable:			
"Other Earned Income" such Control Reliable third-party documenting tip income Social Security, disability of Documentation showing provider, and Documentation showing Rental income: Copy of the most recent	umentation de). r death benef g the amount g the receipt of t filed federal	its, pensi and freq of payme	the amount and nation, public assistant uency of the beneficant, such as copies on with all schedules	te, or adopts, such as f the two re, including	e income (e.g. ption assistance letters, exhibit most recent back g Schedule E—	paystub, emp ce: ts, disability p ank statement Supplement Ir	olicy or benefits state s showing deposit am ncome and Loss. Rent	ement from the nounts.
qualifying purposes will If rental income is not rebank statements or can Investment income: Copies of the two most Alimony, child support, or and the copy of divorce decree, of the alimony, child su	eported on So celled rent ch recent invest separation mand separation and pport, or separation	hedule E ecks dem ment sta aintenan greemen aration m	- Supplemental Inconstrating receipt of tements or bank stace payments as quat, or other written leaintenance paymer	ome and I of rent. tements s alifying inc egal agree ats and the	Loss, provide a supporting rece come:* ment filed with e period of tim	copy of the ceipt of this income a court, or cee over which t	ome. ourt decree that state the payments will be in	nt with either
*Notice: Alimony, child support, this loan.	or separate r	naintena	nce income need n	ot be reve	aled if you do	not choose to	have it considered f	or repaying

UNIFORM BORROWER ASSISTANCE FORM								
	HARDSHIP AFFIDAVIT							
options. Date Hardship Began is:	ituation to determine whether I qualify for temporary or permanent mortgage loan relief							
I believe that my situation is:	<u> </u>							
	-term (6 – 12 months) Long-term or Permanent Hardship (greater than 12 months)							
	payment because of reason set forth below:							
(Please check the primary reason and submit req	quired documentation demonstrating your primary hardship)							
If Your Hardship is:	Then the Required Hardship Documentation is:							
☐ Unemployment	No hardship documentation required							
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)	□ No hardship documentation required							
Increase in Housing Expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control	□ No hardship documentation required							
Divorce or legal separation; Separation of Borrowers unrelated by marriage, civil union or similar domestic partnership under applicable law	 □ Divorce decree signed by the court; OR □ Separation agreement signed by the court; OR □ Current credit report evidencing divorce, separation, or non-occupying borrower has a different address; OR □ Recorded quitclaim deed evidencing that the non-occupying Borrower or co-Borrower has relinquished all rights to the property 							
Death of a borrower or death of either the primary or secondary wage earner in the household	□ Death certificate; OR□ Obituary or newspaper article reporting the death							
Long-term or permanent disability; Serious illness of a borrower/co- borrower or dependent family member	 □ Proof of monthly insurance benefits or government assistance (if applicable); OR □ Written statement or other documentation verifying disability or illness; OR □ Doctor's certificate of illness or disability; OR □ Medical bills None of the above shall require providing detailed medical information. 							
Disaster (natural or man-made) adversely impacting the property or Borrower's place of employment	 ☐ Insurance claim; OR ☐ Federal Emergency Management Agency grant or Small Business Administration loan; OR ☐ Borrower or Employer property located in a federally declared disaster area 							
☐ 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: 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 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).							
☐ 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	Written explanation describing the details of the hardship and relevant							
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.

Borrower Signature	 Date	Co-Borrower Signature	 Date
•	•	ss I have provided to the Lender/S being contacted by □text messagi	•
 I consent to being contacted co		0 0	'

^{*}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.