Making Home Affordable Program Hardship Affidavit



HARDSHIP AFFIDAVIT	「page 1	C	OMPLETE ALL THREE PA	GES OF THIS FORM			
Loan I.D. Number			Servicer				
	BORROWER			CO-BORROWER	R		
Borrower's name			Co-borrower's name				
Social Security Number			Social Security Numb	er			
Property address (include city, state and zip):							
I want to:	☐ Keep the Property	Sell the Prop	perty				
The property is my:	Principal Residence	☐ Second Hom	ne / Seasonal Rental	☐ Year-Round Rent	tal		
The property is:	Owner Occupied	☐ Tenant Occu	ıpied	☐ Vacant	Other		
HARDSHIP AFFIDAVIT							
I (We) am/are requesting review under the Making Home Affordable (MHA) Program. I am having difficulty making my monthly payment because of financial difficulties created by (check all that apply):							
☐ My 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.			☐ My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt.				
☐ My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.			☐ My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.				
☐ I am unemployed and (a) I am receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.			□ Other:				
Explanation (continue on back of page 3 if necessary):							
Have you filed for bankruptcy? □Yes □ No If yes: □ Chapter 7 □ Chapter 13 Filing Date: Has your bankruptcy been discharged? □Yes □No Bankruptcy case number							
How many single-family properties, other than your personal residence, do you and/or your co-borrower(s) own individually, jointly, or with others?							
Has the mortgage on your principle residence ever had a Home Affordable Modification Program (HAMP) trial-period plan or permanent modification?							
Has the mortgage or any other property that you or any co-borrower own had a permanent HAMP modification? Yes No If "Yes", how many?							

DODD-FRANK CERTIFICATION

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). You are required to furnish this information. The law provides that no person shall be eligible to begin receiving assistance from the Making Home Affordable Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 et seq.), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: (A) felony larceny, theft, fraud, or forgery, (B) money laundering or (C) tax evasion.

I/we certify under penalty of perjury that I/we have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:

- (a) felony larceny, theft, fraud, or forgery,
- (b) money laundering or
- (c) tax evasion.

I/we understand that the servicer, the U.S. Department of the Treasury, or their respective agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate Federal law.

This certification is effective on the earlier of the date listed below or the date this hardship affidavit is received by your servicer.

This request was taken by:

☐ Face-to-face interview

☐ Mail☐ Telephone

 \square Internet

Interviewer's Signature

Interviewer's Phone Number (include area code)

	RENTAL PROPER	TY CERTIFICATION			
You must complete this cer	tification if you are requesting	a mortgage modific	cation with respect to a rental property.		
			n respect to the rental property having the address set ue and correct with respect to that property:		
servicer, the U.S. Department of the Trea	sury, or their respective agents may lence must show that I used reasona	ask me to provide evide	te of my mortgage modification. I understand that the ence of my intention to rent the property during such roperty to a tenant or tenants on a year-round basis, if		
			al newspapers, websites or other commonly used forms of property, in either case, at or below market rent.		
	lerstand that if I do use the property	as a secondary residence	y residence for at least five years following the effective te during such five-year period, my use of the property		
Note: The term "secondary residence" in part-time, seasonal or other basis.	cludes, without limitation, a second ho	ome, vacation home or otl	ther type of residence that I personally use or occupy on a		
3. I do not own more than five (5) sing	gle-family homes (i.e., one-to-four	unit properties) (exclus	sive of my principal residence).		
dependent, parent or grandparent to considered to be inconsistent with the This certification is effective on the ear	to occupy it as their principal resingularies the certifications made herein. The certifications made herein.	dence with no rent ch	it as my principal residence, or permit my legal harged or collected, none of which will be davit is received by your servicer.		
Initials: Borrower Co-borr	ower				
	INFORMATION FOR GOVERN	MENT MONITORING	S PLIBPOSES		
INFORMATION FOR GOVERNMENT MONITORING PURPOSES The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. If you do not wish to furnish the information, please check the box below.					
BORROWER	urnish this information	CO-BORROWER	\square I do not wish to furnish this information		
Ethnicity:		Ethnicity:	☐ Hispanic or Latino☐ Not Hispanic or Latino		
Race:		Race:	 ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White 		
Sex: ☐ Female ☐ Male		Sex:	☐ Female☐ Male		
To be o	ompleted by interviewer		Name/Address of Interviewer's Employer		
This request was taken by:	Interviewer's Name (print or type) &	ID Number			

ACKNOWLEDGEMENT AND AGREEMENT

- That all of the information in this document is truthful and the event(s) identified on page 1 is/are the reason that I need to request a modification or forbearance of the terms of my mortgage loan, short sale or deed-in-lieu of foreclosure.
- I understand and acknowledge that the Servicer, the U.S. Department of the Treasury, the owner or quarantor of my mortgage loan, or their respective agents may investigate the accuracy of my statements, may require me to provide additional supporting documentation and that knowingly submitting false information may violate Federal or other applicabale law.
- I authorize and give permission to the Servicer, the U.S. Department of the Treasury, and their respective agents, to assemble and use a current consumer report on all borrowers obligated on the loan, to investigate each borrower's eligibility for MHA and the accuracy of my statements and any documentation that I provide in connection with my request for assistance. I understand that these consumer reports may include, without limitation, a credit report, and be assembled and used at any point during the application process to assess each borrower's eligibility thereafter.
- I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or if it is determined that any of my statements or any information contained in the documentation that I provide are materially false and that I was ineligible for assistance under MHA, the Servicer, the U.S. Department of the Treasury, or their respective agents may terminate my participation in MHA, including any right to future benefits and incentives that otherwise would have been available under the program, and also may seek other remedies available at law and in equity, such as recouping any benefits or incentives previously received.
- I certify that any property for which I am requesting assistance is a habitable residential property that is not subject to a condemnation notice.
- I certify that I am willing to provide all requested documents and to respond to all Servicer communications in a timely manner. I understand that time is of the essence.
- I understand that the Servicer will use the information I provide to evaluate my eligibility for available relief options and foreclosure alternatives, but 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.
- I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
- If I am eligible for assistance under MHA, and I accept and agree to all terms of an MHA notice, plan, or agreement, I also agree that the terms of this Acknowledgment and Agreement are incorporated into such notice, plan, or agreement by reference as if set forth therein in full. My first timely payment, if required, following my servicer's determination and notification of my eligibility or prequalification for MHA assistance will serve as my acceptance of the terms set forth in the notice, plan, or agreement sent to me.
- 10. I understand that my Servicer will collect and record personal information that I submit in this Hardship Affidavit and during the evaluation process, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about my account balances and activity. I understand and consent to the Servicer's disclosure of my personal information and the terms of any MHA notice, plan or agreement to the U.S. Department of the Treasury and its agents, Fannie Mae and Freddie Mac in connection with their responsibilities under MHA, companies that perform support services in conjunction with MHA, any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services my first lien or subordinate lien (if applicable) mortgage loan(s) and to any HUD-certified housing
- 11. I consent to being contacted concerning this request for mortgage assistance at any e-mail address or cellular or mobile telephone number I have provided to the Servicer. This includes text messages and telephone calls to my cellular or mobile telephone.

The undersigned certifies under penalty of perjury that all statements in this document are true and correct.

Borrower Signature	Social Security Number	Date of Birth	Date
Co-borrower Signature	Social Security Number	Date of Birth	Date

HOMEOWNER'S HOTLINE

If you have questions about this document or the Making Home Affordable Program, please call your servicer.

Hope Hotline at 1-888-995-HOPE (4673). The Hotline can help with questions about the program and offers free HUD-certified counseling services in English and Spanish.



NOTICE TO BORROWERS

Be advised that by signing this document you understand that any documents and information you submit to your servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including but not limited to misstatement regarding your occupancy of your property, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail fraud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to my Servicer in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse, mismanagement or misrepresentations affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), 202-622-4559 (fax), or www.sigtarp.gov and provide them with your name, our name as your servicer, your property address, loan number and the reason for escalation. Mail can be sent to Hotline Office of the Special Inspector General for Troubled Asset Relief Program, 1801 L St. NW, Washington, DC 20220

Beware of Foreclosure Rescue Scams. Help is FREE!

There is never a fee to get assistance or information about the Making Home Affordable Program from your lender or a HUD-approved housing counselor.

Beware of any person or organization that asks you to pay a fee in exchange for housing counseling services or modification of a delinquent loan

Beware of anyone who says they can "save" your home if you sign or transfer over the deed to your house. Do not sign over the deed to your property to any organization or individual unless you are working directly with your mortgage company to forgive your debt.

Never make your mortgage payments to anyone other than your mortgage company without their approval.