

HomeEq Servicing

BORROWER & PROPERTY INFORMATION:

Property Address: _____ Account #: _____
 Is property listed for sale? No Yes
 Listing Price: _____
 Buyer Name: _____ Relationship to Seller: _____
 Agent Name: _____ Agent Phone: _____

Is property insured? If, yes please provide the following: No Yes
 Insurance Company: _____ Policy Number: _____
 Agent Name: _____ Agent Phone: _____
 Borrower Name: _____ Phone: _____
 Mailing Address: _____

City: _____ State: _____ Zip: _____
 Co-Borrower Name: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____

Total number of persons at residence: _____ Number of Dependents: _____ Ages: _____

| Asset Type | Estimated Value | Asset Type | Estimated Value | Asset Type | Estimated Value |
|---------------|-----------------|------------|-----------------|------------|-----------------|
| Home | \$ 401K/Keogh | | | | \$ |
| Checking Acct | \$ IRA | | | | \$ |
| Savings Acct | \$ Stocks | | | | \$ |

| Liability | Monthly Payment | Liability | Monthly Payment | Liability | Monthly Payment |
|--------------------|-----------------|-----------------|-----------------|------------------|-----------------|
| HomeEq Mortgage | \$ | Auto Insurance | \$ | Water/Sewer | \$ |
| Other Mortgages | \$ | Electric | \$ | Health Insurance | \$ |
| Property Insurance | \$ | Gas | \$ | Internet Service | \$ |
| Property Taxes | \$ | Telephone | \$ | Auto Maintenance | \$ |
| Child Support | \$ | Cable/Satellite | \$ | Medical Premiums | \$ |
| Child Care | \$ | | | Medical Co-Pays | \$ |
| Tuition | \$ | | | Food | \$ |
| Alimony | \$ | | | Clothing | \$ |
| Auto Loan(s) | \$ | | | Other | \$ |
| Church/Club Dues | \$ | | | Other | \$ |

If you any mortgage other than HomeEq, please provide the following information:

Lien Holder 1: Phone: () Account #: _____ Balance: \$ _____
 Lien Holder 2: Phone: () Account #: _____ Balance: \$ _____
 Lien Holder 3: Phone: () Account #: _____ Balance: \$ _____
 Auto1 - Make: _____ Model: _____ Year: _____ Est. Value: \$ _____
 Auto2 - Make: _____ Model: _____ Year: _____ Est. Value: \$ _____
 Other Vehicles: _____ Model: _____ Year: _____ Est. Value: \$ _____

Borrower Net Monthly Income \$ _____ Employer: _____ Phone: ()
 Co-Borrower Net Monthly Income \$ _____ Employer: _____ Phone: ()
 Additional/Other Income: \$ _____ Type: child support, alimony, pensions, interest, rental, other: _____ Amount: _____

I (we) agree that the financial information provided is an accurate statement of my (our) financial status, I (we) understand and acknowledge that any action taken by the lender of my (our) mortgage loan on my (our) behalf will be made in strict reliance on it financial information provided. My (Our) signature(s) below grants the holder of my (our) mortgage the authority to confirm information I (we) have disclosed in this financial statement, to verify that it is accurate by ordering a credit report, and to contact my real estate agent, attorney, broker and/or credit counseling service representative. This is an attempt to collect a debt and any information obtained **WILL** be used for that purpose.

Submitted this _____ day of _____, 20_____

By: _____ Date _____ Signature of Borrower
 By: _____ Date _____ Signature of Co-Borrower
Incomplete information may delay the processing of your request Date: _____

LOSS MITIGATION—Short Sale Guidelines and Pre-Negotiation Agreement
Page Four

Account Number: _____
Secured Property Address: _____

BORROWER'S ACKNOWLEDGMENT AND AGREEMENT:

I am requesting consideration of a short sale based on financial hardship. The financial statement that I will submit in connection with a proposed short sale of the secured property accurately describes my financial condition. All documentation I present is true, accurate and correct to the best of my knowledge. I agree that if it is determined that the financial information presented has been misrepresented by me, I shall be liable for any and all losses or damages suffered by the lienholder, servicer, investor, and/or private mortgage insurance company.

I UNDERSTAND AND AGREE THAT THIS DOCUMENT DOES NOT CONSTITUTE APPROVAL OF A SHORT SALE OR IN ANY WAY OBLIGATE SERVICER, ANY INVESTOR, LIEN HOLDER OR PRIVATE MORTGAGE INSURANCE COMPANY TO ACCEPT A SHORT SALE OF THE SECURED PROPERTY. NEITHER I, NOR ANY THIRD PARTY, INCLUDING BUT NOT LIMITED TO, A POTENTIAL PURCHASER/INVESTOR OR ANY REAL ESTATE AGENT/ATTORNEY INVOLVED WITH THE LISTING OR SALE OF THE SECURED PROPERTY, MAY RELY UPON THIS DOCUMENT AS APPROVAL OF A SHORT SALE OR AN OBLIGATION UPON SERVICER, ANY INVESTOR, LIEN HOLDER OR PRIVATE MORTGAGE INSURANCE COMPANY TO APPROVE A SHORT SALE OF THE SECURED PROPERTY.

I FURTHER UNDERSTAND AND AGREE THAT THE REQUIREMENTS STATED HEREIN ARE SUBJECT TO CHANGE AT THE SOLE DISCRETION OF SERVICER.

Furthermore, I acknowledge and agree to Servicer's Short Sale Guidelines as described above.

By: _____ Date _____
Signature of Borrower Signature of Borrower Date

Printed Name of Borrower Printed Name of Borrower

HOMEQ SERVICING

Loss Mitigation Department

HomeEq Servicing

IMPORTANT DISCLOSURES

IMPORTANT: You are hereby notified that we may report information about your account to credit reporting agencies. Late payments, missed payments, or other defaults on your account may also be reflected on your credit report.

NORTH CAROLINA Collection Agency Permits: 4408 – North Highlands, CA (Main Office); 4406 – Raleigh, NC (Branch); 4407 – Roseville, CA (Branch); 4409 – Boone, NC (Branch); 4410 – New York City, NY (Branch)

HOMEQ SERVICING

**LOSS MITIGATION DEPARTMENT
OCCUPANCY AFFIDAVIT**

Account Number: _____
Secured Property Address: _____

_____ I / We **currently** occupy the above-referenced property.
_____ I / We **do not currently** occupy the above-referenced property.

The foregoing statement is true and correct.

By: _____ By: _____
Signature of Borrower Date Signature of Borrower Date

Printed Name of Borrower Printed Name of Borrower

HOMEQ SERVICING

LOSS MITIGATION DEPARTMENT PROPERTY ACCESS FOR APPRAISAL INFORMATION

Date: _____

Re Loan Number: _____

Secured Property Address: _____

To be completed by Borrower:

1) Borrower: _____
Home Phone # _____
Work Phone # _____
Any special instructions: _____

2) Borrower: _____
Home Phone # _____
Work Phone # _____
Any special instructions: _____

To be completed by HomeEq:

1) Type of Transaction: _____

2) Type of Appraisal: _____

- Fannie Mae 219/Freddie Mac (drive-by)
- Fannie Mae 1004/Freddie Mac 70
- Fannie Mae 1025/Freddie Mac 72
- 2 units
- 3 units
- 4 units

Order date: _____ By: _____

Form **4506-T**

(Rev. January 2010)

Department of the Treasury
Internal Revenue Service

Request for Transcript of Tax Return

OMB No. 1545-1872

▶ **Request may be rejected if the form is incomplete or illegible.**

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can also call 1-800-829-1040 to order a transcript. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.

1b First social security number on tax return or employer identification number (see instructions)

2a If a joint return, enter spouse's name shown on tax return.

2b Second social security number if joint tax return

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code

4 Previous address shown on the last return filed if different from line 3

5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

Caution. If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.

6 **Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶

a **Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

b **Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days.

c **Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days

7 **Verification of Nonfiling**, which is proof from the IRS that you did not file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 **Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days

Caution. If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, either husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of signature date.

▶ **Sign Here** Signature (see instructions) Date

▶ **Spouse's signature** Title (if line 1a above is a corporation, partnership, estate, or trust) Date

Telephone number of taxpayer on line 1a or 2a