



ARMS LENGTH TRANSACTION AFFIDAVIT

Whereas, all parties relevant to this transaction are hereby indicating to US Bank Home Mortgage that no party to this contract is a family member or business associate or shares a business interest with the mortgagor(s) or mortgagee. It is further stipulated there are no "hidden terms" or "special understandings" between the seller(s), buyer(s) or their agent(s) in order to entice, induce or otherwise defraud the seller's mortgagee in this transaction. The Buyer(s) & Seller(s) nor their Agent(s) listed below have any agreements (written or implied) that will allow the Seller(s) to remain in their property as renters or to regain ownership of said property after the successful execution of this short sale transaction.

Property Address: _____

Seller: _____

Signature: _____ Date: _____

Buyer: _____

Signature: _____ Date: _____

Agent: _____

Signature: _____ Date: _____

The undersigned declares under penalty of perjury that the information contained in this affidavit is true and correct.

State of: _____ County of: _____

On _____, before me _____
(Date) (Name and Title of Officer)

Personally appeared _____
(Name of Signer(s))

(Name of Signer(s))

- personally known to me -OR-
- proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledges to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

SIGNATURE OF NOTARY

In response to your request for a Loan Modification/Short Sale, please complete and provide all requested information below. This form must be thoroughly completed in order to process your request.

Mail or Fax completed packet to:

U.S. Bank Loss Mitigation

17650 N.E. Sandy Blvd.

PD-OR-CICC

Portland, OR 97230

1-503-401-8887 (Fax)

U.S. Bank Loan Number: _____

Telephone: 1-888-780-3997

FINANCIAL INFORMATION STATEMENT

PROPERTY INFORMATION		No. of Units
Subject Property Address (Street, City, State & Zip Code)		
Borrower	Co-Borrower	
BORROWER INFORMATION		
Borrower's Name (include Jr. or Sr. if applicable)		
Co-Borrower's Name (including Jr. or Sr. if applicable)		
Social Security No.	Pl. Numbers You Can Be Reached Work _____ Home _____ Cell _____	Pl. Numbers You Can Be Reached Work _____ Home _____ Cell _____
Please include all area codes		
_____ Married _____ Unmarried (include single, divorced, widowed)	_____ Married _____ Separated	_____ Unmarried (include single, divorced, widowed)
Present Address (Street, City, State & Zip code) _____ own _____ rent _____ # yrs		
EMPLOYMENT INFORMATION		
Borrower	Co-Borrower	
Name of Employer _____ Self-employed _____ Name of Employer _____ Self-employed _____		
Business Phone (include area code)		
MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION		
NET Monthly Income	Borrower	Co-Borrower
Base Employment Income	\$	\$
Overtime		
Bonuses		
Commissions		
Net Rental Income		
Total	\$	\$
Self employed Borrower(s) may be required to provide additional documentation such as tax returns and financial statements. Describe other income such as alimony, child support or separate maintenance income need not be revealed.		
Borrower or Co-Borrower	Description of Other Income	Monthly Amount
		\$

STANDARD MONTHLY OBLIGATIONS

Food:	Child Care:	Mortgage Pmt:
Utilities:	Transportation:	Car Pmt:
Telephone:	Insurance/Car:	Other:
Insurance/Health:	Cable:	Other:
Medical Bills:	Insurance/Life:	Other:

ASSETS AND LIABILITIES

Assets		Liabilities	
Description	Cash Value	Liabilities & Pledged Assets: List the creditor's name and account number for all outstanding debts including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use extra sheets if necessary.	

List checking and saving accounts below:
 Name of Bank, S&L or Credit Union

Description	Monthly Pmt & #s to pay	Unpaid Balance
Name of Company	\$ Pmt & Mos	\$
Acct Number		\$
Name of Bank, S&L or Credit Union		
Acct Number		\$
Stocks & Bonds		\$
Company Name/Description		\$
Life Insurance net cash value		\$
Face Amount: \$		\$
SUBTOTAL LIQUID ASSETS		\$
Real Estate Owned (enter market value from schedule of real estate owned below)		\$
Vested Interest in Retirement fund		\$
Net worth if business(es) owned (Attach Financial Statement)		\$
Automobile owned (Make and Year)		\$
Automobile owned (Make and Year)		\$
Other Assets (Itemized)		\$
Total assets (a)		\$
Net Worth (a-b): \$		\$

Schedule of Real Estate Owned (if additional properties are owned, use extra sheets)

Property Address (enter S if sold, FS for pending sale, R if rental held for income)	Type of Property	Present market Value	Amount of Mortgages & Liens	Gross Rental Income	Insurance, Maintenance, Taxes & Misc.	Net Rental Income
		\$	\$	\$	\$	\$
Totals		\$	\$	\$	\$	\$

HARDSHIP LETTER

In order for us to better understand your present situation, please take a moment and describe for us what happened that caused you to fall behind on your payment?

I have described my present financial condition on this Financial Evaluation Sheet and the attachments hereto and I certify that all of the information contained hereon is true, accurate and correct to the best of my knowledge.

I understand and realize that the financial information I am providing will be used by the lender and/or insurer of my Mortgage Loan to review and evaluate my options with respect to the Mortgage Loan. I further understand and acknowledge that any action taken by the lender and/or the insurer of my Mortgage Loan on my behalf will be made in strict reliance on the financial information I am providing herein. This may include U.S. Bank obtaining a copy of my current credit bureau. I understand that my signature below authorizes U.S. Bank to obtain and release information to any 3rd party as necessary, for the initiation of a modification request.

I therefore agree that, if it is determined that the financial information I have provided contained information which was misrepresented by me and thereby caused actions to be taken which would not have been taken had the true facts and circumstances been known, I shall be liable for any and all losses or damages suffered by the lender and/or insurer of my Mortgage Loan.

Signature of Borrower Martin J Saffo Date 8/1

Signature of Co-Borrower Jennifer Saffo Date _____

Form **4506-T**

Request for Transcript of Tax Return

(Rev. January 2008)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0072

- ▶ Do not sign this form unless all applicable lines have been completed. Read the instructions on page 2.
- ▶ Request may be rejected if the form is incomplete, illegible, or any required line was blank at the time of signature.

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.

205 W 4th Street, Suite 500 Cincinnati, OH 45202

Caution: DO NOT SIGN this form if a third party requires you to complete Form 4506-T, and lines 6 and 9 are blank.

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. 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. 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 2006, filed in 2007, will not be available from the IRS until 2008. 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 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.

Signature (see instructions)

Date

Telephone number of taxpayer on line 1a or 2a (____) _____

Title (if line 1a above is a corporation, partnership, estate, or trust)

Spouse's signature

Date

AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize you to release any and all information to:
Company: **Short Safe Success** (including any of its agents and/or assigns)
Individuals: **Deborah Priebe or Randy Asbell**

regarding the loan for the below referenced property. This authorization shall remain in effect until I specifically notify my mortgage company either verbally or in writing that this authorization is no longer in effect.

Date of last payment made on loan: _____ (if applicable)

Borrower Name/Address:

1st Mortgage Company

Print Name _____

Street Address _____ 1st Mortgage Account Number _____

City, State, Zip _____

Signed _____ Social Security Number _____

Print Name _____ Date _____

Signed _____ Social Security Number _____

Print Name _____ Date _____

Servicer: _____

Loan Number: _____

HELP FOR AMERICA'S HOMEOWNERS.



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 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 Certificate is effective on the earlier of the date listed below or the date received by your servicer.

_____ Borrower Signature	_____ Date
_____ Co-Borrower Signature	_____ Date
_____ Co-Borrower Signature	_____ Date
_____ Co-Borrower Signature	_____ Date