

Documents Needed

Make sure all of the information listed below is returned along with this Financial Evaluation. Missing documents may result in a delay in processing or denial of your request.

For each borrower who is a salaried employee:

- Copy of the most recent filed federal tax return with all schedules; and
- Copy of the most recent one month's pay stubs, and
- Copy of the most recent two month's bank statements.

For each borrower who is self-employed:

- Copy of the most recent two years filed federal tax returns with all schedules, and
- Copy of the most recent quarterly or year-to-date profit/loss statement, and
- Copy of the most recent six month's bank statements.

For each borrower who has income such as social security, disability or death benefits, pension, public assistance, or unemployment:

- Copy of most recent federal tax return with all schedules and W-2 or copies of two most recent bank statements.
- Copy of benefits statement or letter from the provider that states the amount, frequency and duration of the benefit. Social security, disability, death or pension benefits must continue for at least 3 years to be considered qualifying income under this program. Public assistance or unemployment benefits must continue for at least 9 months to be considered qualifying income under this program.

For each borrower who is relying on alimony or child support as qualifying income:

- Copy of divorce decree, separation agreement or other written agreement or decree that states the amount of the alimony or child support and period of time over which it will be received. Payments must continue for at least 3 years to be considered qualifying income under this program.
- Proof of full, regular and timely payments; for example deposit slips, bank statements, court verification or filed federal tax return with all schedules.

For each borrower who has rental income:

- Copies of most recent two years filed federal tax returns with all schedules, including Schedule E— Supplement Income and Loss. Rental income for qualifying purposes will be 75% of the gross rent.

For each borrower whose property is located in a flood zone:

- Current copy of Flood Insurance Policy

For each borrower whose loan is not currently collecting escrows for property taxes, homeowners insurance, flood insurance and/or homeowners' association fees:

- Current copies of property tax bills, Homeowners Insurance Policy, Flood Insurance policy and/or Home Owners Association bill.

If this account is not a first mortgage, please also send a current statement from your first mortgage holder.

If the property is being sold, please include these items in addition to those listed above.

- Current copy of U.S. Department of Housing and Urban Settlement Statement (HUD Statement)
- Current copy of the most recent 401K Statement (if applicable)

Please forward the financial evaluation packet and all required documents to:

**U.S. Bank
Attn: Loss Mitigation Dept. / PD-OR-C1CC
P.O. Box 5830
Portland, OR 97228-5830
Fax: 1-503-401-8887**

ORIGINALS WILL NOT BE RETURNED.

Loan number: <loan_num>

Mortgage Assistance Application

If you are having mortgage payment challenges, please complete and submit this application, along with the required documentation, to [servicer name] via mail: [address], fax: [fax #], or online: [website/email address]. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

We will use the information you provide to help us identify the assistance you may be eligible to receive. If you need help completing this application, please contact [servicer name] at [phone #].

For a list of HUD-approved housing counseling agencies that can provide foreclosure prevention information, contact one of the following federal government agencies:

- The U.S. Department of Housing and Urban Development (HUD) at (800) 569-4287 or www.hud.gov/counseling
- The Consumer Financial Protection Bureau (CFPB) at (855) 411-2372 or www.consumerfinance.gov/mortgagehelp

If you need assistance with translation or other language assistance, HUD-approved housing counseling agencies may be able to assist you. These services are provided without charge.

Borrower Information

Borrower's name: _____

Social Security Number (last 4 digits): _____

E-mail address: _____

Primary phone number: _____ Cell Home Work Other

Alternate phone number: _____ Cell Home Work Other

Co-borrower's name: _____

Social Security Number (last 4 digits): _____

E-mail address: _____

Primary phone number: _____ Cell Home Work Other

Alternate phone number: _____ Cell Home Work Other

Preferred contact method (choose all that apply): Cell phone Home phone Work phone Email Text—checking this box indicates your consent for text messaging

Is either borrower on active duty with the military (including the National Guard and Reserves), the dependent of a borrower on active duty, or the surviving spouse of a member of the military who was on active duty at the time of death? Yes No

Property Information

Property Address: _____

Mailing address (if different from property address): _____

- The property is currently: A primary residence A second home An investment property
- The property is (select all that apply): Owner occupied Renter occupied Vacant
- I want to: Keep the property Sell the property Transfer ownership of the property to my servicer Undecided

Is the property listed for sale? Yes No – If yes, provide the listing agent's name and phone number—or indicate "for sale by owner" if applicable: _____

Is the property subject to condominium or homeowners' association (HOA) fees? Yes No – If yes, indicate monthly dues: \$ _____

Hardship Information

The hardship causing mortgage payment challenges began on approximately (date) _____ and is believed to be:

- Short-term (up to 6 months)
- Long-term or permanent (greater than 6 months)
- Resolved as of (date) _____

TYPE OF HARDSHIP (CHECK ALL THAT APPLY)	REQUIRED HARDSHIP DOCUMENTATION
<input type="checkbox"/> Unemployment	<ul style="list-style-type: none"> ▪ Not required
<input 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)	<ul style="list-style-type: none"> ▪ Not required
<input type="checkbox"/> Increase in housing-related expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control (e.g., uninsured losses, increased property taxes, HOA special assessment)	<ul style="list-style-type: none"> ▪ Not required
<input type="checkbox"/> Disaster (natural or man-made) impacting the property or borrower's place of employment	<ul style="list-style-type: none"> ▪ Not required
<input type="checkbox"/> Long-term or permanent disability, or serious illness of a borrower/co-borrower or dependent family member	<ul style="list-style-type: none"> ▪ Written statement from the borrower, or other documentation verifying disability or illness ▪ Note: Detailed medical information is not required, and information from a medical provider is not required
<input type="checkbox"/> Divorce or legal separation	<ul style="list-style-type: none"> ▪ Final divorce decree or final separation agreement OR ▪ Recorded quitclaim deed
<input type="checkbox"/> Separation of borrowers unrelated by marriage, civil union, or similar domestic partnership under applicable law	<ul style="list-style-type: none"> ▪ Recorded quitclaim deed OR ▪ Legally binding agreement evidencing that the non-occupying borrower or co-borrower has relinquished all rights to the property
<input type="checkbox"/> Death of borrower or death of either the primary or secondary wage earner	<ul style="list-style-type: none"> ▪ Death certificate OR ▪ Obituary or newspaper article reporting the death
<input type="checkbox"/> Distant employment transfer/relocation	<ul style="list-style-type: none"> ▪ For active duty service members: Permanent Change of Station (PCS) orders or letter showing transfer. ▪ For employment transfers/new employment: Copy of signed offer letter or notice from employer showing transfer to a new location or written explanation if employer documentation not applicable, AND ▪ Documentation that reflects the amount of any relocation assistance provided (not required for those with PCS orders)
<input type="checkbox"/> Other – hardship that is not covered above: _____ _____ _____ _____	<ul style="list-style-type: none"> ▪ Written explanation describing the details of the hardship and any relevant documentation

Borrower Income

Please enter all borrower income amounts in middle column.

MONTHLY TOTAL BORROWER INCOME TYPE & AMOUNT		REQUIRED INCOME DOCUMENTATION
Gross (pre-tax) wages, salaries and overtime pay, commissions, tips, and bonuses	\$	<ul style="list-style-type: none"> ▪ Most recent pay stub and documentation of year-to-date earnings if not on pay stub OR ▪ Two most recent bank statements showing income deposit amounts
Self-employment income	\$	<ul style="list-style-type: none"> ▪ Two most recent bank statements showing self-employed income deposit amounts OR ▪ Most recent signed and dated quarterly or year-to-date profit/loss statement OR ▪ Most recent complete and signed business tax return OR ▪ Most recent complete and signed individual federal income tax return
Unemployment benefit income	\$	<ul style="list-style-type: none"> ▪ No documentation required
Taxable Social Security, pension, disability, death benefits, adoption assistance, housing allowance, and other public assistance	\$	<ul style="list-style-type: none"> ▪ Two most recent bank statements showing deposit amounts OR ▪ Award letters or other documentation showing the amount and frequency of the benefits
Non-taxable Social Security or disability income	\$	<ul style="list-style-type: none"> ▪ Two most recent bank statements showing deposit amounts OR ▪ Award letters or other documentation showing the amount and frequency of the benefits
Rental income (rents received, less expenses other than mortgage expense)	\$	<ul style="list-style-type: none"> ▪ Two most recent bank statements demonstrating receipt of rent OR ▪ Two most recent deposited rent checks
Investment or insurance income	\$	<ul style="list-style-type: none"> ▪ Two most recent investment statements OR ▪ Two most recent bank statements supporting receipt of the income
Other sources of income not listed above (Note: Only include alimony, child support, or separate maintenance income if you choose to have it considered for repaying this loan)	\$	<ul style="list-style-type: none"> ▪ Two most recent bank statements showing receipt of income OR ▪ Other documentation showing the amount and frequency of the income

Current Borrower Assets

Exclude retirement funds such as a 401(k) or Individual Retirement Account (IRA), and college savings accounts such as a 529 plan.

Checking account(s) and cash on hand	\$
Savings, money market funds, and Certificates of Deposit (CDs)	\$
Stocks and bonds (non-retirement accounts)	\$
Other:	\$

Borrower Certification and Agreement

1. I certify and acknowledge that all of the information in this Mortgage Assistance Application is truthful, and the hardship I identified contributed to my need for mortgage relief. Knowingly submitting false information may violate Federal and other applicable law.
2. I agree to provide my servicer with all required documents, including any additional supporting documentation as requested, and will respond in a timely manner to all servicer or authorized third party* communications.
3. I acknowledge and agree that my 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.
4. I consent to the servicer or authorized third party* obtaining a current credit report for the borrower and co-borrower.
5. I consent to the disclosure by my servicer, authorized third party,* or any investor/guarantor of my mortgage loan(s), of any personal information collected during the mortgage assistance process and of any information about any relief I receive, to any third party that deals with my first lien or subordinate lien (if applicable) mortgage loan(s), including Fannie Mae, Freddie Mac, or any investor, insurer, guarantor, or servicer of my mortgage loan(s) or any companies that provide support services to them, for purposes permitted by applicable law. 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.
6. I agree that the terms of this borrower certification and agreement will apply to any modification trial period plan, repayment plan, or forbearance plan that I may be offered based on this application. If I receive an offer for a modification trial period plan or repayment plan, I agree that my first timely payment under the plan will serve as acceptance of the plan.
7. I consent to being contacted concerning this application 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.*

* An authorized third party may include, but is not limited to, a housing 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: _____

Please submit your completed application, together with the required documentation, to [servicer name] via mail: [address], fax: [fax #], or online: [website/email address]. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

We will use the information you provided to help us identify the assistance you may be eligible to receive.

Monthly Household Expenses

To better assist us in verifying your monthly expenses, please provide the following information and return this form with the enclosed Request for Modification Affidavit upon completion.

Monthly Expense	Amount
Auto Insurance	\$
Equity or Other Loans	\$
Auto Loan	\$
Medical or Life Insurance (not deducted from salary)	\$
Food/Groceries	\$
Telephone/Cell Phone	\$
Gas/Electric/Water/Trash	\$
Gasoline/Parking/Auto Maintenance/Transportation	\$
Cable/Satellite/Internet	\$
Child care	\$
Student Loans	\$
Medical Bills	\$
Cleaning Supplies	\$
Donations	\$
Miscellaneous (Provide explanation)	\$
Miscellaneous (Provide explanation)	\$
Miscellaneous (Provide explanation)	\$
Miscellaneous (Provide explanation)	\$
Miscellaneous (Provide explanation)	\$

Borrower Date

Co-Borrower Date

