

# MORTGAGE ASSISTANCE

## APPLICATION FORM

If you are having difficulty making your mortgage payments, please complete and submit this application along with the required documentation detailed within this form.

Once received, we will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents. All information provided will be used to help us identify any mortgage assistance you may be eligible to receive.

**For a list of HUD-approved housing counseling agencies that can provide foreclosure prevention information, please 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](http://www.hud.gov/counseling)
- ▶ The Consumer Financial Protection Bureau (CFPB) at 855-411-2372 or [www.consumerfinance.gov/mortgagehelp](http://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.

## HOMEOWNER INFORMATION

**LOAN #:** \_\_\_\_\_

**BORROWER NAME:** \_\_\_\_\_

SOCIAL SECURITY # (LAST 4 DIGITS): \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ ☐ CELL ☐ HOME ☐ WORK ☐ OTHER

ALTERNATE PHONE: \_\_\_\_\_ ☐ CELL ☐ HOME ☐ WORK ☐ OTHER

**CO-BORROWER NAME:** \_\_\_\_\_

SOCIAL SECURITY # (LAST 4 DIGITS): \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ ☐ CELL ☐ HOME ☐ WORK ☐ OTHER

ALTERNATE PHONE: \_\_\_\_\_ ☐ CELL ☐ HOME ☐ WORK ☐ OTHER

**ADDITIONAL APPLICANT\*:** \_\_\_\_\_

SOCIAL SECURITY # (LAST 4 DIGITS): \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ ☐ CELL ☐ HOME ☐ WORK ☐ OTHER

ALTERNATE PHONE: \_\_\_\_\_ ☐ CELL ☐ HOME ☐ WORK ☐ OTHER

\*FHA and USDA insured loans will require additional applicants that apply and are approved for a loan modification and/or partial claim to be financially liable for the debt before the workout option becomes effective and may be required to sign a loan assumption agreement.

**Is any borrower on active military duty (including 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): \_\_\_\_\_

**PROPERTY IS CURRENTLY:** ☐ A PRIMARY RESIDENCE ☐ A SECONDARY HOME ☐ AN INVESTMENT PROPERTY

\*For secondary home or investment properties: Please provide supporting documentation regarding your primary residence expenses (current lease, or current non-EPM serviced by Carrington Mortgage Billing Statement).

**PROPERTY IS** (SELECT ALL THAT APPLY): ☐ OWNER OCCUPIED ☐ RENTER OCCUPIED ☐ VACANT

**I WANT TO:** ☐ KEEP PROPERTY ☐ SELL PROPERTY ☐ TRANSFER OWNERSHIP OF PROPERTY TO CARRINGTON ☐ UNDECIDED

**IS PROPERTY LISTED FOR SALE?** ☐ YES ☐ NO If yes, provide listing agent's name & phone # **or** indicate "For Sale By Owner" if applicable: \_\_\_\_\_

**IS PROPERTY SUBJECT TO CONDOMINIUM OR HOMEOWNERS' ASSOCIATION (HOA) FEES?**

☐ YES ☐ NO If yes, indicate frequency (select one) and amount of dues: \$ \_\_\_\_\_ ☐ MONTHLY ☐ QUARTERLY ☐ YEARLY

## HARDSHIP INFORMATION

**The hardship causing mortgage payment challenges began on** \_\_\_\_\_ *(approx. DD/MM/YR)*  
**and is believed to be:**

☐ **SHORT-TERM** *(Up to 6 Months)* ☐ **LONG-TERM/PERMANENT** *(More than 6 Months)* ☐ **RESOLVED** *(as of DD/MM/YR)* \_\_\_\_\_

| TYPE OF HARDSHIP (CHECK ALL THAT APPLY)                                                                                                                                                                                                             | REQUIRED HARDSHIP DOCUMENTATION                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Unemployment                                                                                                                                                                                                               | Not required                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Reduction in income: a hardship that has caused a decrease in your income due to circumstances outside of your control (e.g., elimination of overtime, reduction in regular working hours, a reduction in base pay)        | 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) | Not required                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Disaster (natural or man-made) impacting the property or borrower's place of employment                                                                                                                                    | Not required                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Long-term or permanent disability, or serious illness of a borrower/co-borrower or dependent family member                                                                                                                 | ▶ Written statement or other documentation verifying disability or illness<br><b>Note:</b> Detailed medical information and/or information from a medical provider is not required                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Divorce or legal separation                                                                                                                                                                                                | ▶ Not required. <b>Note:</b> All borrowers obligated on this loan will be required to sign loan modification documents, if applicable.                                                                                                                                                                                                                                                                                                                              |
| <input type="checkbox"/> Separation of borrowers unrelated by marriage, civil union, similar domestic partnership under applicable law                                                                                                              | ▶ Recorded quitclaim deed (special warranty deed for TX properties), <b>OR</b><br>▶ Legally binding agreement evidencing that the non-occupying borrower has relinquished all rights to the property                                                                                                                                                                                                                                                                |
| <input type="checkbox"/> Death of borrower or death of either the primary or secondary wage earner                                                                                                                                                  | ▶ Death certificate, <b>OR</b><br>▶ Obituary/newspaper article reporting the death                                                                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Distant employment transfer/relocation                                                                                                                                                                                     | ▶ <b>For active duty service members:</b> Permanent Change of Station (PCS) orders or letter showing transfer<br>▶ <b>For employment transfers/new employment:</b> Copy of signed offer letter or notice from employer showing transfer to a new location or written explanation if employer documentation is not applicable, <b>AND</b><br>▶ 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)                                                                                                                                                                                 | ▶ Written explanation describing the details of the hardship and any relevant documentation                                                                                                                                                                                                                                                                                                                                                                         |

## MONTHLY HOUSEHOLD INCOME

Please enter all income amounts in the middle column:

| INCOME TYPE                                                                                                                                                                    | AMOUNT                                                                       | REQUIRED INCOME DOCUMENTATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Gross (pre-tax) income, salaries and overtime pay, commissions, tips and bonuses                                                                                               | \$ _____ (borrower)<br>\$ _____ (co-borrower)<br>\$ _____ (addt'l applicant) | <ul style="list-style-type: none"> <li>▶ Most recent pay stub and documentation of year-to-date earnings if not on pay stub, <b>OR</b></li> <li>▶ Two most recent bank statements showing income deposit amounts</li> </ul> <p><b>USDA loans only:</b></p> <ul style="list-style-type: none"> <li>▶ Pay stub(s) covering the most recent 30 consecutive days and documentation of year-to-date earnings (if not on pay stubs)</li> <li>▶ If pay stubs do not include at least 6 months of year-to-date earnings, <b>additionally include one of the following:</b> <ul style="list-style-type: none"> <li>- Copy of your most recent W-2; <b>OR</b></li> <li>- Signed copy of your most recently filed tax returns; <b>OR</b></li> <li>- Signed and dated IRS Form 4506-C (available at <a href="http://www.EPM.servicedbyCarrington.com/mortgage-assistance">www.EPM.servicedbyCarrington.com/mortgage-assistance</a>)</li> </ul> </li> </ul> |
| Self-employment income                                                                                                                                                         | \$ _____ (borrower)<br>\$ _____ (co-borrower)<br>\$ _____ (addt'l applicant) | <ul style="list-style-type: none"> <li>▶ Most recent signed and dated quarterly or year-to-date profit/loss statement, <b>OR</b></li> <li>▶ Most recent complete and signed business tax return, <b>OR</b></li> <li>▶ Most recent complete and signed individual federal tax return, <b>OR</b></li> <li>▶ Two most recent bank statements showing self-employed income deposit amounts</li> </ul> <p><b>USDA loans only:</b></p> <ul style="list-style-type: none"> <li>▶ Most recent signed and dated quarterly or year-to-date profit/loss statement, <b>AND</b></li> <li>▶ Copy of most recent signed and dated business or individual federal tax return, <b>OR</b> a signed and dated IRS Form 4506-C</li> </ul> <p><b>Note:</b> Form 4506-C and a sample profit and loss statement are available at <a href="http://www.EPM.servicedbyCarrington.com/mortgage-assistance">www.EPM.servicedbyCarrington.com/mortgage-assistance</a></p>   |
| Unemployment benefit income                                                                                                                                                    | \$ _____ (borrower)<br>\$ _____ (co-borrower)<br>\$ _____ (addt'l applicant) | Not required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Taxable Social Security, pension, disability, death benefits, adoption assistance, housing allowance and other public assistance                                               | \$ _____ (borrower)<br>\$ _____ (co-borrower)<br>\$ _____ (addt'l applicant) | <ul style="list-style-type: none"> <li>▶ Two most recent bank statements showing deposits (include all pages), <b>OR</b></li> <li>▶ Award letter or other documentation showing the amount and frequency of the benefits</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Non-taxable Social Security or disability income                                                                                                                               | \$ _____ (borrower)<br>\$ _____ (co-borrower)<br>\$ _____ (addt'l applicant) | <ul style="list-style-type: none"> <li>▶ Two most recent bank statements showing deposits (include all pages), <b>OR</b></li> <li>▶ Award letter or other documentation showing the amount, duration and frequency of the benefits</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Rental income (rents received, less expenses other than mortgage expense)                                                                                                      | \$ _____ (borrower)<br>\$ _____ (co-borrower)<br>\$ _____ (addt'l applicant) | <ul style="list-style-type: none"> <li>▶ Two most recent bank statements demonstrating receipt of rent, <b>OR</b></li> <li>▶ Two most recent deposited rent checks</li> </ul> <p><b>Note:</b> If you have rental income from properties with loan balances with other lenders, <b>please include</b> your most recent Non-EPM serviced by Carrington mortgage billing statement.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Investment or insurance income                                                                                                                                                 | \$ _____ (borrower)<br>\$ _____ (co-borrower)<br>\$ _____ (addt'l applicant) | <ul style="list-style-type: none"> <li>▶ Two most recent investment statements, <b>OR</b></li> <li>▶ Two most recent bank statements supporting receipt of the income</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Other sources of income not listed above (Note: only include alimony, child support, or separate maintenance income if you choose to have it considered in repaying this loan) | \$ _____ (borrower)<br>\$ _____ (co-borrower)<br>\$ _____ (addt'l applicant) | <ul style="list-style-type: none"> <li>▶ Two most recent bank statements showing receipt of income, <b>OR</b></li> <li>▶ Other documentation showing the amount and frequency of the income</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

## CURRENT HOUSEHOLD ASSETS

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

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

## MONTHLY HOUSEHOLD LIVING EXPENSES

List average monthly household expenses:

| EXPENSE TYPE                                                              | TOTAL AMOUNT |
|---------------------------------------------------------------------------|--------------|
| <b>Utilities</b> (including electric, water, gas, cell, cable, etc.)      | \$           |
| <b>Food</b> (including groceries, household supplies, pet expenses, etc.) | \$           |
| <b>Auto</b> (including gas, insurance, repairs, tolls, etc.)              | \$           |
| <b>Tuition / Child Care</b>                                               | \$           |
| <b>Child Support / Alimony</b>                                            | \$           |
| <b>Medical</b>                                                            | \$           |
| <b>Miscellaneous Recurring Expenses</b> (List items below)                | \$           |
|                                                                           | \$           |
|                                                                           | \$           |
|                                                                           | \$           |
|                                                                           | \$           |

# MORTGAGE ASSISTANCE APPLICATION TERMS OF 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 applicants listed in this application.
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.

## REQUIRED SIGNATURE SECTION FOR ALL APPLICANTS

### BORROWER SIGNATURE:

\_\_\_\_\_ DATE: \_\_\_\_\_

### CO-BORROWER SIGNATURE:

\_\_\_\_\_ DATE: \_\_\_\_\_

### ADDITIONAL APPLICANT SIGNATURE:

\_\_\_\_\_ DATE: \_\_\_\_\_

## SHORT SALE REQUESTS

In addition to the required information outlined in this application, short sale requests may require the following additional documents:

### DOCUMENTATION

- ▶ **Third-Party Authorization** — Required only if you want EPM serviced by Carrington to discuss your request with a third party acting on your behalf, such as a real estate agent or attorney.
- ▶ **Contact Information** — If the property is currently listed for sale or vacant, please provide the contact name and phone number so we can access the property and perform an appraisal if necessary. **NOTE:** *All utilities must be on for an appraisal to be completed.*
- ▶ **Listing Agreement** — Please, provide a copy of the current listing agreement with your agent/broker.
- ▶ **Purchase Contract** — Please, provide a copy of the purchase contract signed by the buyer and seller. Contract must include language that the sale is contingent upon approval from EPM serviced by Carrington.
- ▶ **Closing Disclosure** — Please, provide a copy of the seller's closing costs. The figures in these statements must be accurate as our approval will be based, in part, on this information.
- ▶ **Buyer Pre-Qualification or Pre-Approval Letter** — Please, provide a copy of the buyer's pre-approval letter.

## DEED IN LIEU OF FORECLOSURE REQUESTS

In addition to the required information outlined in this application, Deed in Lieu requests may require the following additional document:

### DOCUMENTATION

- ▶ **Listing Agreement** — Please, provide a copy of recent listing agreement that documents your recent attempt to sell the property.

## SUBMITTING YOUR MORTGAGE ASSISTANCE APPLICATION

Please use one of the options below to submit your Mortgage Assistance Application and required documentation:

### ONLINE

- ▶ MortgageAssistance@Carringtonms.com

### MAIL

- ▶ Mail completed applications and supporting documentation to:  
Equity Prime Mortgage, LLC serviced by Carrington Mortgage Services, LLC  
Attn: Loss Mitigation  
1600 South Douglass Road, Suites 110 & 200-A Anaheim, CA 92806