

BORROWER FINANCIAL INFORMATION

LOAN NUMBER:]		
BORROWER		CO-BORROWER		
BORROWER'S NAME		CO-BORROWER'S NAM	IE	
SOCIAL SECURITY NUMBER DA	TE OF BIRTH	SOCIAL SECURITY NUI	MBER	DATE OF BIRTH
HOME PHONE WITH AREA CODE (BE	EST TIME TO CALL)	HOME PHONE WITH AF	REA CODE	(BEST TIME TO CALL)
WORK PHONE WITH AREA CODE (BE	EST TIME TO CALL)	WORK PHONE WITH A	REA CODE	(BEST TIME TO CALL)
CELL PHONE WITH AREA CODE (BE	EST TIME TO CALL)	CELL PHONE WITH ARI	EA CODE	(BEST TIME TO CALL)
MAILING ADDRESS				
PROPERTY ADDRESS (IF SAME AS MAILING	G ADDRESS, JUST W	(RITE SAME)	EMAIL A	DDRESS
NUMBER OF CARS YOU OWN NUMBER	R OF DEPENDENTS A	T THIS ADDRESS	Do you occupy t YES { } NO {	
,	t leased? 5 { } NO { } (It	f you have a lease agre	ement, please pro	ovide a copy.)
Is your home listed for sale? YES { } N AGENT'S NAME:	O{ } (If yes, pl PHONE:	ease provide a copy of EMAIL:		nent.)
How long has it been listed?	Any offers/inqu YES{ } NO {		LISTING SALES	PRICE
Have you contacted a credit-counseling ag COUNSELOR'S NAME:	ency for help? YES PHONE:	{ } NO { } EMAIL:	:	
Do you receive, and pay, the real estate ta I DO { } LENDER DOES { } (If you pa Are the taxes current? YES { } NO { Do you pay for a hazard insurance policy? (If you pay, please provide a copy of your	y, please provide a } YES { } NO {	copy of your tax stater		: }
Have you filed for bankruptcy? YES { } IF YES, CHAPTER 7 { } CHAPTER 13 {		DATE:		
Has your bankruptcy been discharged? YE (If yes, please provide a copy of the discha		the court.)		
	INVOLUNTARY I	NABILITY TO PAY		
I (We),, am/are requesting that Flagstar Bank review my/our financial situation to determine if I/we qualify for a workout option. I am having difficulty making my monthly payment because of financial difficulties created by (<i>Please check all that apply</i>):				
Abandonment of Property Business Failure	payment because of { } Excessive { } Fraud		ated by (<i>Please c</i> { } Military Se { } Payment A	ervice
{ } Casualty Loss	<pre>{ } Illness in</pre>	Family	{ } Payment [Dispute
{ } Curtailment of Income	{ } Illness of	Mortgagor	{ } Property P	roblems
{ } Death in Family	<pre>{ } Inability </pre>	to Rent Property	{ } Title Probl	ems
<pre>{ } Death of Mortgagor</pre>	<pre>{ } Incarcera</pre>	ition	{ } Transferring	ng Property
{ } Distant Employment Transfer	{ } Marital D	ifficulties	{ } Unemploy	ment
{ } Servicing Problem	<pre>{ } Inability </pre>	to Sell	<pre>{ } Energy/En</pre>	vironment Costs
{ } Other				
I believe that my situation is: { } Short term (under 6 months) { } Long term (over 6 months) { } Permanent I want to: { } Keep the property { } Sell the Property				



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	EMPLO	DYMENT		
BORROWER-EMPLOYER'S ADDRESS/PH	HONE HOW LONG?	CO-BORROWER-EMPLOYER'S ADDRES	5/PHONE HOW LONG?	
MONTHLY INCOME- BORROWER		MONTHLY INCOME- CO-BORROWER		
GROSS INCOME		GROSS INCOME		
NET INCOME		NET INCOME		
UNEMPLOYMENT INCOME		UNEMPLOYMENT INCOME		
CHILD SUPPORT/ALIMONY*		CHILD SUPPORT/ALIMONY*		
DISABILITY INCOME/SSI		DISABILITY INCOME/SSI		
RENTS RECEIVED		RENTS RECEIVED		
OTHER		OTHER		
LESS: FEDERAL & STATE SALES TAX, FICA		LESS: FEDERAL & STATE SALES TAX, FICA		
LESS: OTHER DEDUCTIONS (401K, ETC)		LESS: OTHER DEDUCTIONS (401K, ETC)		
COMMISSIONS, BONUS AND SELF-EMPLOYED INCOME		COMMISSIONS, BONUS AND SELF-EMPLOYED INCOME		
		tenance income need not be reveale to have it considered for repaying t		
TOTAL	\$	TOTAL	\$	
MONTHLY EXPENSES		ASSETS		
OTHER MORTGAGES/LIENS	\$	ТҮРЕ	ESTIMATED VALUE	
AUTO LOAN(S)	\$	CHECKING ACCOUNT(S)	\$	
CREDIT CARDS/INSTALLMENT LOANS	\$	SAVING/MONEY MARKET	\$	
HEALTH INSURANCE/MEDICAL	\$	STOCKS/BONDS/CDs	\$	
STUDENT LOANS	\$	IRA/KEOGH ACCOUNTS	\$	
CHILD CARE/SUPPORT/ALIMONY	\$	401K/ESPO ACCOUNTS	\$	
FOOD/SPENDING MONEY	\$	НОМЕ	\$	
WATER/SEWER/UTILITIES/PHONE	\$	OTHER REAL ESTATE	\$	
HOA/CONDO FEES/PROPERTY MAINTENANCE	\$	CARS	\$	
AUTO EXPENSES	\$	BOATS	\$	
LIFE INSURANCE PAYMENT	\$	LIFE INSURANCE	\$	
ENTERTAINMENT/DISCRETIONARY	\$	OTHER	\$	
FLAGSTAR LOAN	\$			
CHARITABLE	\$			
TOTAL	\$	TOTAL	\$	
	'		'	



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LOAN NUMBER:			
	Lien Ho	lders	
If there are additional Liens/Mortga telephone numbers.	iges or Judgements on this property, p	please name the person(s), company or firm and their respective
	\$	%	
Lien Holder's Name	Balance	Interest Rate	Phone Number (with area code)
	\$	%	
Lien Holder's Name	Balance	Interest Rate	Phone Number (with area code)

FINAL INSTRUCTIONS:

Before returning this Borrower Financial Information form to us, please complete the following:

- 1. Sign and date this Borrower Financial Information form.
- 2. Sign and date the hardship letter explaining the reason for your request.
- 3. Include proof of any household income with supporting documentation dated within 60 days of today's date for each borrower. For example: wages, unemployment, child support, alimony, Social Security, disability, etc.
- Include proof of rental income, including the lease agreement and copies of last three months' cancelled rent checks.
- 5. Include the front and back copies of each borrower's driver's license.
- 6. Include last two monthly statements for all checking, savings, 401(k) accounts, etc.
- 7. Include last two years' W-2 forms and most recent income tax return, including all schedules.

Flagstar may, at its discretion, require that each borrower furnish additional information and/or documentation to substantiate his or her current financial status.

I (We) agree that the financial information provided in the Borrower Financial Information form is an accurate statement of my (our) financial status as of the date of my (our) signature(s) below. I (we) understand and acknowledge that any action taken by Flagstar Bank, Inc. or its successors or assigns, as the lender and/or servicer of my (our) mortgage loan, will be made in strict reliance on the information provided in this Borrower Financial Information form. My (Our) signature(s) below grants Flagstar Bank, Inc. or its successors or assigns, as the lender and/or servicer of my (our) mortgage loan, the authority to confirm the information I (we) have provided in this Borrower Financial Information form and attached hardship letter, to verify that it is accurate by ordering a credit report, to contact me (us) to discuss my (our) loan, and to contact my (our) Realtor and/or credit counseling service representative (if applicable).

The Borrower Financial Information form is part of Flagstar's debt collection process. All information obtained relating to this form will be used for that purpose.

Ву:		Ву:	Ву:		
Borrower Printed Name		Co-Borrower Printed Name	Co-Borrower Printed Name		
Ву:	Date:	Ву:	Date:		
Borrower Signature		Co-Borrower Signature			



LOAN NUMBER:

Please provide a detailed explanation of the hardship in the space below.

By:		By:		
Borrower Printed Name		Co-Borrower Printed Name		
By: Borrower Signature	_ Date:	By: Co-Borrower Signature	Date:	



LOAN NUMBER:

Please provide a detailed explanation of the hardship in the space below.

By:		By:		
Borrower Printed Name		Co-Borrower Printed Name		
By: Borrower Signature	_ Date:	By: Co-Borrower Signature	_ Date:	