



Ocwen Loan Servicing, LLC
HELPING HOMEOWNERS IS WHAT WE DO!™
WWW.OCWEN.COM

RE: **Short Sale Request Package**

The enclosed materials are being sent in response to your recent inquiry regarding a short sale settlement on the above referenced loan. Please complete and return this entire package with supporting documentation.

Important Information about the Short Sale Process

- ◆ DO NOT send an incomplete package or your request will not be considered.
- ◆ Send the documents in the same format as this package as any document substitutions will delay the process.
- ◆ Submission of this information is not a guarantee that a short sale payoff will be accepted.
- ◆ The processing and review of the documentation you provide generally takes 20-30 days.
- ◆ Your submission will NOT result in an automatic stoppage of any foreclosure proceedings.
- ◆ If the loan qualifies for a short sale under the Home Affordable Foreclosure Alternatives Program (HAFA), you may download and send HAFA Matrix document

If you have not previously contacted us regarding eligibility for a loan modification, you should consider this alternative. Under the Home Affordable Modification Program (HAMP), you may qualify for a modification with affordable and sustainable monthly payments that would allow you to keep your home. Please contact us within 14 days of the date of this request if you would like to be considered for a loan modification.

Sincerely,

Ocwen Loan Servicing, LLC

This communication is from a debt collector attempting to collect a debt; any information obtained will be used for that purpose. However, if the debt is in active bankruptcy or has been discharged through bankruptcy, this communication is not intended as and does not constitute an attempt to collect a debt.

NMLS #: 1852



What is the Home Affordable Foreclosure Alternative (HAFA) Program – Short Sale?

For homeowners looking for help selling their home and avoiding foreclosure, the federal government has introduced the Home Affordable Foreclosure Alternatives (HAFA) Program to help. As the mortgage servicer, we are offering the opportunity to participate in this program by utilizing HAFA's short sale option if the loan qualifies. If the loan does not qualify, Ocwen may still be able to assist with an Ocwen short sale program.

A "short sale" is specifically designed to help borrowers who are unable to afford their first mortgage and want to sell their home to avoid foreclosure, even if the sale price may not pay off the amount owed on their mortgage. A short sale requires a number of parties (the homeowner, the buyer, the real estate broker, and sometimes mortgage insurance companies and other lenders) to work together to make this option successful. However, it could be a good solution for the homeowner's current situation.

If the homeowner(s) qualifies for the HAFA program they will receive \$3,000 to help pay some of the moving expenses. (The check will be paid to the homeowner(s) by the settlement agent as part of the closing and this amount would be included in the short sale offer and the HUD-1 Settlement Statement.) In the event there is any money left over from the sale after paying the entire amount owed on the mortgage plus the approved sale costs, the homeowner(s) will not be eligible to receive the \$3,000.

How Does a Short Sale Work?

♦ **Offer:**

When an offer is received for the home, you will submit the required information and documentation to us for review.

♦ **Review:**

Ocwen will process and review the offer and the information you submitted. This generally takes 20-30 days.

♦ **Approval** (if applicable):

Provided the offer is approved, we will send you an agreement letter.

♦ **Closing** (if applicable):

Once the sale closes, we will release the borrower(s) from all responsibilities for repaying the mortgage

Homeowner Responsibilities

- ♦ Keep your house and your property in good condition and repair and cooperate with your broker to show it to potential buyers.
- ♦ Be able to provide the buyer of your home with clear title. To start, determine if you have other loans, judgments or liens secured by your home, such as a home-equity line of credit or a second mortgage. If there are such liens, you will need to either pay these loans off in full or negotiate with the lien holders to release them before the closing date. Under this program, you must make sure other lien holders will agree not to pursue other legal action related to the pay off of their lien, such as a deficiency judgment. You can get help from your broker to negotiate with the other lien holders.

IRS and Credit Reporting Information

- ♦ The difference between the remaining amount of principal the homeowner(s) owes and the amount that we receive from the sale must be reported to the Internal Revenue Service (IRS) on Form 1099C, as debt forgiveness. In some cases, debt forgiveness could be taxed as income. Amounts allowed for moving expenses may also be reported as income. We suggest that you contact the IRS or your tax preparer to determine if you may have any tax liability.
- ♦ We will follow standard industry practice and report to the major credit reporting agencies that your mortgage was settled for less than the full balance. We have no control over, or responsibility for the impact of this report on your credit score.



Instructions for Completing the Short Sale Package

Step 1

Complete all the enclosed attachments

Exhibit A	Documentation Requirements
Exhibit B	Contact Information
Exhibit C	Lien Information
Exhibit D	Affidavit of "Arm's Length Transaction"
Exhibit E	Occupancy Status
Exhibit F	Authorization to Release Information
Exhibit G	Hardship Letter
Exhibit H	Financial Income / Expenses Documentation

Step 2

Send Ocwen the completed package and supporting documentation

Methods to return the documents:

1. **Fax to:** 407-737-5071
2. Scan and **email to:** ss@ocwen.com
3. **Mail to:** Ocwen Loan Servicing, LLC
Attn: Short Sale
1661 Worthington Road, Suite 100
West Palm Beach, Florida 33409

Step 3

Allow up to 30 days for processing

Ocwen will make every effort to review and process your request as quickly as possible. Ensuring that you provide ALL requested information together is the best thing you can do to ensure the most rapid response time.

Step 4

Approval or denial

Ocwen will contact you to let you know the outcome of our review. If approved, you will receive an approval offer letter that will need to be signed and returned with the payoff funds.



Loan Number:

Exhibit A: Document Requirements

In addition to the Exhibits included in this package, the following documents must also be provided:

- ☐ Fully executed listing agreement and listing history (Multiple Listing Services)
 - Real estate commission must not exceed 6% of the contract sales price
 - Closing costs not to exceed 2% of the contract sales price
- ☐ Fully executed real estate contract(s) (purchase contract or sales contract) and any addendums
- ☐ Completed Estimated HUD-1 Settlement Statement with the correct and complete property address (must be typed)
- ☐ Buyer's proof of funds or pre-approval letter
- ☐ Two months of most recent bank statements
- ☐ Paystubs and documentation for all sources of income from the last 30 days
- ☐ Tax returns for last year - all forms included

If applicable, the following documents must also be provided:

- ☐ Utility bills
 - (Applies to property's that are no longer owner occupied, but that were owner occupied in the last 12 months. The utility bills would need to reflect that the property was owner occupied at some point in the last 12 months.)
- ☐ Payoff letters for any other liens on the property
- ☐ Copy of any judgments on the property
- ☐ Death certificate of any deceased person that has signed the Mortgage. (If all Mortgagees are deceased, Power of Attorney documentation must be provided along with the death certificate(s).)

If you have filed bankruptcy the property may be affected, therefore we require a signed letter from the court approving the sale of the home. Please submit copy of the court approval and complete the below fields.

- ☐ Signed letter from the bankruptcy court approving the sale of the home (for loans in bankruptcy).

Bankruptcy attorney's information:

Name: _____

Phone number: _____

Fax number: _____

Email address: _____

Address: _____



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Loan Number: _____

Exhibit B: Contact Information

Licensed Realtor name and contact information:

Realtor Name: _____
Office Number: _____
Cell Number: _____
Fax Number: _____
Email Address: _____

Who you would like us to contact for any updates or issues with the short sale transaction?

Name: _____
Phone Number: _____
Cell Number: _____
Fax Number: _____
Email Address: _____

Exhibit C: Lien Information

Check the appropriate box(s) below:

Are there any other loans secured by the property? ☐ YES ☐ NO
Are there any other liens, such as an IRS or Homeowner's Association lien? ☐ YES ☐ NO
Are there any judgments on the property? ☐ YES ☐ NO

If you answered yes to any of the above, please provide the details below:

N u m b e r	Name Of Lien Holder	Unpaid Principle Balance
1		
2		
3		
4		
5		
6		

☐ A payoff statement for any other liens and a copy of any judgment(s) will need to be provided.

We may allow an aggregate of up to \$6,000 to be paid from the sale proceeds to help get subordinate lien releases. Remember, clearing these other liens and delivering clear and marketable title is your responsibility.



Loan Number:

Exhibit D: Affidavit of "Arm's Length Transaction"

Property address:

Street City State Zip

All Parties to the contract to purchase aforementioned property dated: _____

Hereby affirm:

1. That this is an "Arm's Length Transaction" and that no party to this contract is a family member, business associate, or share a business interest with the mortgagor.
2. Further, there are no hidden terms or special understandings between the seller or Buyer or their agents or mortgagor.
3. That neither the Buyers and Sellers nor their Agents have any agreements written or implied that will allow the Seller to remain in the property as renters or regain ownership of said property at any time after the execution of this short sale transaction.
4. With the sole exception of payment of agents' commission or other government relocation assistance for which you may be eligible, neither the seller, buyer nor any other parties to this transaction shall receive any proceeds.
5. Each signatory understands that a misrepresentation may subject the responsible party to civil and/or criminal liability.
6. There are no agreements, understandings or contracts relating to the current sale or subsequent sale of the mortgaged premises that have not been disclosed to the servicer.
7. Each signatory understands, agrees and intends that the servicer and/or Freddie Mac are relying upon the statements made in the affidavit as consideration for the reduction of the payoff amount of the mortgage and agreement to the sale of the mortgaged premises.
8. Each signatory agrees to indemnify the servicer and/or Freddie Mac for any and all loss resulting from any negligent or intentional misrepresentation made in the affidavit including, but not limited to repayment of the amount of the reduced payoff of the mortgage.
9. This certification will survive the closing of the transaction.



Loan Number:

Exhibit D: Affidavit of "Arm's Length Transaction" (continued)

- ♦ You cannot list the property with or sell the property to anyone that you are related to or with whom you have a close personal or business relationship. In legal language, it must be an **"arm's length transaction."** If you have a real estate license, you cannot earn a commission by listing your own property. You may not have any agreements to receive a portion of the commission or the sales price after closing. Any buyer of your property must agree to not sell the home within 90 calendar days of the date it is sold by you. You may not have any expectation that you will be able to buy or rent your house back after the closing. Any knowing violation of the arm's length transaction prohibition may be a violation of federal law.

Seller



Buyer



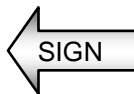
Date

Date

Seller's Printed Name

Buyer's Printed Name

Seller's Agent



Buyer's Agent



Date

Date

Seller's Agent Printed Name

Buyer's Agent Printed Name

Escrow/Closing Company

Escrow/Closing Agent Printed Name

Escrow/Closing Agent





Exhibit E: Occupancy Status

Check the appropriate box(es) below that applies to this property:

- ☐ Owner occupied
☐ Rental
☐ Vacant

♦ If you checked **rental** or **vacant**:

Was the property owner occupied in the last 12 months?

☐ YES

☐ NO

OR

Has the property been vacant or rented out for more than 12 months?

☐ YES

☐ NO

♦ If you checked **rental** or **vacant** and that the property was owner occupied in the last 12 months, please submit utility bills to support that the property was owner occupied prior to relocating.

♦ Have you purchased any one-to-four unit properties during the last 12 months?

☐ YES

☐ NO



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Loan Number: _____

Exhibit F: Third-Party Authorization Form (Authorization to Release Information)

Ocwen Loan Servicing, LLC

Mortgage Lender/Servicer Name ("Servicer")

The undersigned Borrower and Co-Borrower (if any) (individually and collectively, "Borrower" or "I"), authorize the above Servicer and the following third parties.

[Counseling Agency]

[Agency Contact Name and Phone Number]

[State HFA Entity]

[State HFA Contact Name and Phone Number]

[Other Third Party]

[Third Party Contact Name and Phone Number]

[Relationship of Other Third Party to Borrower and Co-Borrower]

(individually and collectively, "Third Party") to obtain, share, release, discuss, and otherwise provide to and with each other public and non-public personal information contained in or related to the mortgage loan of the Borrower. This information may include (but is not limited to) the name, address, telephone number, social security number, credit score, credit report, income, government monitoring information, loss mitigation application status, account balances, program eligibility, and payment activity of the Borrower. I also understand and consent to the disclosure of my personal information and the terms of any agreements under the Making Home Affordable or Hardest Hit Fund Programs by Servicer or State HFA to the U.S. Department of the Treasury or their agents in connection with their responsibilities under the Emergency Economic Stabilization Act.

The Servicer will take reasonable steps to verify the identity of a Third Party, but has no responsibility or liability to verify the identity of such Third Party. The Servicer also has no responsibility or liability for what a Third Party does with such information.

Before signing this Third-Party Authorization, beware of foreclosure rescue scams!

- ◆ It is expected that a HUD-approved housing counselor, HFA representative or other authorized third party will work directly with your lender/mortgage servicer.
- ◆ Please visit <http://makinghomeaffordable.gov/counselor.html> to verify you are working with a HUD-approved housing counseling agency.
- ◆ Beware of anyone who asks you to pay a fee in exchange for a counseling service or modification of a delinquent loan.

This Third-Party Authorization is valid when signed by all borrowers and co-borrowers named on the mortgage and until the Servicer receives a written revocation signed by any borrower or co-borrower.

I UNDERSTAND AND AGREE WITH THE TERMS OF THIS THIRD-PARTY AUTHORIZATION:

Borrower Printed Name

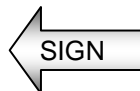
Co-Borrower Printed Name

Borrower Signature

Co-Borrower Signature

Date

Date





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Exhibit G: Hardship Affidavit Letter

Making Home Affordable Program
Hardship Affidavit



HARDSHIP AFFIDAVIT page 1

COMPLETE ALL THREE PAGES OF THIS FORM

Loan I.D. Number _____ Servicer _____

BORROWER	CO-BORROWER
Borrower's name	Co-borrower's name
Social Security Number	Social Security Number

Property address (include city, state and zip): _____

I want to:	<input type="checkbox"/> Keep the Property	<input type="checkbox"/> Sell the Property
The property is my:	<input type="checkbox"/> Primary Residence	<input type="checkbox"/> Second Home <input type="checkbox"/> Investment Property
The property is:	<input type="checkbox"/> Owner Occupied	<input type="checkbox"/> Renter Occupied for Less than 12 Months <input type="checkbox"/> Vacant for Less than 12 Months

HARDSHIP AFFIDAVIT

I (We) am/are requesting review under the Making Home Affordable Program.
I am having difficulty making my monthly payment because of financial difficulties created by (check all that apply):

<input type="checkbox"/> My household income has been reduced. For example: reduced pay or hours, decline in business earnings, death, disability or divorce of a borrower or co-borrower.	<input type="checkbox"/> My monthly debt payments are excessive and I am overextended with my creditors. Debt includes credit cards, home equity or other debt.
<input type="checkbox"/> My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.	<input type="checkbox"/> My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.
<input type="checkbox"/> I am unemployed and (a) I am receiving/will receive unemployment benefits or (b) my unemployment benefits ended less than 6 months ago.	<input type="checkbox"/> Other: _____

Explanation (continue on back of page 3 if necessary): _____

Have you filed for bankruptcy? ☐ Yes ☐ No If yes: ☐ Chapter 7 ☐ Chapter 13 Filing Date: _____
Has your bankruptcy been discharged? ☐ Yes ☐ No Bankruptcy case number _____

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. **You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it.** If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. **If you do not wish to furnish the information, please check the box below.**

BORROWER	<input type="checkbox"/> I do not wish to furnish this information	CO-BORROWER	<input type="checkbox"/> I do not wish to furnish this information
Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male	Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male

To be completed by interviewer

This request was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet	Interviewer's Name (print or type) & ID Number	Name/Address of Interviewer's Employer
	Interviewer's Signature Date	
	Interviewer's Phone Number (include area code)	



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HARDSHIP AFFIDAVIT page 2

COMPLETE ALL THREE PAGES OF THIS FORM

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 certification is effective on the earlier of the date listed below or the date this hardship affidavit is received by your servicer.

ACKNOWLEDGEMENT AND AGREEMENT

In making this request for consideration under the Making Home Affordable Program, I certify under penalty of perjury:

1. That all of the information in this document is truthful and the event(s) identified on page 1 is/are the reason that I need to request a modification or forbearance of the terms of my mortgage loan, short sale or deed-in-lieu of foreclosure.
2. I understand that the Servicer, the U.S. Department of the Treasury, or their agents may investigate the accuracy of my statements, and may require me to provide supporting documentation. I also understand that knowingly submitting false information may violate Federal law.
3. I understand the Servicer will pull a current credit report on all borrowers obligated on the Note.
4. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this document, the Servicer may cancel any Agreement under Making Home Affordable and may pursue foreclosure on my home.
5. That I have not received a condemnation notice, there has been no change in the ownership of the Property since I signed the documents for the mortgage that I want to modify, and:
 - (a) for consideration for the Home Affordable Modification Program (HAMP) or unemployment assistance, my property is owner-occupied and I intend to reside in this property for the next twelve months, or
 - (b) for consideration for the Home Affordable Foreclosure Alternatives Program (HAFA), my property has been owner-occupied within the last twelve months.
6. I am willing to provide all requested documents and to respond to all Servicer questions in a timely manner.
7. I understand that the Servicer will use the information in this document to evaluate my eligibility for a loan modification or forbearance or short sale or deed-in-lieu of foreclosure, but the Servicer is not obligated to offer me assistance based solely on the statements in this document.
8. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
9. I understand that the Servicer will collect and record personal information, including, but not limited to, my name, address, telephone number, Social Security Number, credit score, income, payment history, government monitoring information, and information about account balances and activity. I understand and consent to the disclosure of my personal information and the terms of any Making Home Affordable Agreement by Servicer to (a) the U.S. Department of the Treasury, (b) Fannie Mae and Freddie Mac in connection with their responsibilities under the Homeowner Affordability and Stability Plan; (c) any investor, insurer, guarantor or servicer that owns, insures, guarantees or services my first lien or subordinate lien (if applicable) mortgage loan(s); (d) companies that perform support services in conjunction with Making Home Affordable; and (e) any HUD-certified housing counselor.

The undersigned certifies/y under penalty of perjury that all statements in this document are true and correct.

➤ _____ Borrower Signature	_____ Social Security Number	_____ Date of Birth	_____ Date
➤ _____ Co-borrower Signature	_____ Social Security Number	_____ Date of Birth	_____ Date



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HARDSHIP AFFIDAVIT page 3

COMPLETE ALL THREE PAGES OF THIS FORM

HOMEOWNER'S HOTLINE

If you have questions about this document or the Making Home Affordable Program, please call your servicer.

If you have questions about the program that your servicer cannot answer or need further counseling, you can call the Homeowner's HOPE™ Hotline at 1-888-995-HOPE (4673). The Hotline can help with questions about the program and offers free HUD-certified counseling services in English and Spanish.



NOTICE TO BORROWERS

Be advised that by signing this document you understand that any documents and information you submit to your servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including but not limited to misstatement regarding your occupancy in your home, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail fraud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to Lender in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse, mismanagement or misrepresentations affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), 202-622-4559 (fax), or www.sigtar.gov and provide them with your name, our name as your servicer, your property address, loan number and reason for escalation. Mail can be sent to Hotline Office of the Special Inspector General for Troubled Asset Relief Program, 1801 L St. NW, Washington, DC 20220.





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Loan Number:

Exhibit H: Financial Information

INCOME/EXPENSES FOR HOUSEHOLD¹

Number of People in Household:

Monthly Household Income		Monthly Household Expenses/Debt		Household Assets	
Monthly Gross Wages	\$	First Mortgage Payment	\$	Checking Account(s)	\$
Overtime	\$	Second Mortgage Payment	\$	Checking Account(s)	\$
Child Support / Alimony / Separation ²	\$	Insurance	\$	Savings/ Money Market	\$
Social Security/SSDI	\$	Property Taxes	\$	CDs	\$
Other monthly income from pensions, annuities or retirement plans	\$	Credit Cards / Installment Loan(s) (total minimum payment per month)	\$	Stocks / Bonds	\$
Tips, commissions, bonus and self-employed income	\$	Alimony, child support payments	\$	Other Cash on Hand	\$
Rents Received	\$	Net Rental Expenses	\$	Other Real Estate (estimated value)	\$
Unemployment Income	\$	HOA/Condo Fees/Property Maintenance	\$	Other _____	\$
Food Stamps/Welfare	\$	Car Payments	\$	Other _____	\$
Other (investment income, royalties, interest, dividends etc.)	\$	Other _____	\$	Do not include the value of life insurance or retirement plans when calculating assets (401k, pension funds, annuities, IRAs, Keogh plans, etc.)	
Total (Gross Income)	\$	Total Debt/Expenses	\$	Total Assets	\$

INCOME MUST BE DOCUMENTED

¹Include combined income and expenses from the borrower and co-borrower (if any). If you include income and expenses from a household member who is not a borrower, please specify using the back of this form if necessary.

²You are not required to disclose Child Support, Alimony or Separation Maintenance income, unless you choose to have it considered by your servicer.

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. **You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it.** If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. **If you do not wish to furnish the information, please check the box below.**

BORROWER <input type="checkbox"/> I do not wish to furnish this information Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	CO-BORROWER <input type="checkbox"/> I do not wish to furnish this information Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male						
To be completed by interviewer							
This request was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="height: 30px; vertical-align: bottom;">Interviewer's Name (print or type) & ID Number</td> </tr> <tr> <td style="width: 50%; height: 30px; vertical-align: bottom;">Interviewer's Signature</td> <td style="width: 50%; height: 30px; vertical-align: bottom;">Date</td> </tr> <tr> <td colspan="2" style="height: 30px; vertical-align: bottom;">Interviewer's Phone Number (include area code)</td> </tr> </table>	Interviewer's Name (print or type) & ID Number		Interviewer's Signature	Date	Interviewer's Phone Number (include area code)	
Interviewer's Name (print or type) & ID Number							
Interviewer's Signature	Date						
Interviewer's Phone Number (include area code)							
Name/Address of Interviewer's Employer							