

Loan Number

BORROWER		CO-BORROWER	
Borrower's Name		Co-Borrower's Name	
Social Security Number		Social Security Number	
Date of Birth		Date of Birth	
Home Phone		Home Phone	
Work Phone		Work Phone	
Cell Phone		Cell Phone	
Mailing Address			
Property Address (If same as mailing address, just write same) _____			
Email Address			
Number of cars your own		Number of dependents at this address	
Do you occupy the property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is it rental property? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
It is listed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If you have a lease agreement, please provide a copy.)			
It your home listed for sale? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If you please provide a copy of the listing agreement.)			
Agent Name _____		Phone _____	
Email			
How long has it been listed?		Any offers/inquiries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Listing Sales Price			
Have you contacted a credit-counseling agency for help? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Counselor's Name _____		Phone _____	
Email _____			
Do you receive, and pay, the real estate tax bill on your home or does your lender? <input type="checkbox"/> I do <input type="checkbox"/> Lender does (If you pay, please provide a copy of your tax statement.)			
Are the taxes current? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If you have a lease agreement, please provide a copy.)			
Do you pay for a hazard insu ranee policy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If you pay, please provide a copy of your hazard policy.)			
Is the policy current? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If you have a lease agreement, please provide a copy.)			
Have you filed for bankruptcy? <input type="checkbox"/> I do <input checked="" type="checkbox"/> Lender does (If yes, please provide a copy of the discharge order signed by the court.)			

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**INVOLUNTARY INABILITY 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 (Please check all that apply):

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Abandonment of Property     | <input type="checkbox"/> Excessive Obligations      | <input type="checkbox"/> Military Service         |
| <input type="checkbox"/> Business Failure            | <input type="checkbox"/> Fraud                      | <input type="checkbox"/> Payment Adjustment       |
| <input type="checkbox"/> Casualty Loss               | <input type="checkbox"/> Illness in Family          | <input type="checkbox"/> Payment Dispute          |
| <input type="checkbox"/> Curtailment of Income       | <input type="checkbox"/> Illness of Mortgagor       | <input type="checkbox"/> Payment Problems         |
| <input type="checkbox"/> Death in Family             | <input type="checkbox"/> Inability to Rent Property | <input type="checkbox"/> Title Problems           |
| <input type="checkbox"/> Death of Mortgagor          | <input type="checkbox"/> Incarceration              | <input type="checkbox"/> Transferring Property    |
| <input type="checkbox"/> Distant Employment Transfer | <input type="checkbox"/> Marital Difficulties       | <input type="checkbox"/> Unemployment             |
| <input type="checkbox"/> Servicing Problem           | <input type="checkbox"/> Inability to Sell          | <input type="checkbox"/> Energy/Environment Costs |
| <input type="checkbox"/> Others                      |   |   |

I believe that my situation is:  Short-term (under 6 months)  Long-term (under 6 months)  Permanent  
 I want to:  Keep the Property  Sell the Property

**EMPLOYMENT**

Borrower-Employer's Address	Co-Borrower-Employer's Address
Borrower-Employer's Phone	Co-Borrower-Employer's Phone
How Long?	How Long?

**MONTHLY INCOME**

Borrower		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	\$0	Other	\$0
Less: Federal and State Tax, FICA	\$	Less: Federal and State Tax, FICA	\$
Less: Other Deduction (401k,etc)	\$	Less: Other Deduction (401k,etc)	\$
Commissions, bonus and self-employed income	\$	Commissions, bonus and self-employed income	\$
Total (Net income)	\$	Total (Net income)	\$

\*Alimony, child support maintenance income need not be revealed if the borrower or co-borrower does not choose to have it considered for repaying this loan.

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Monthly Expenses		Assets	
Other Mortgage / Liens	\$	Checking Account(s)	\$
Auto Loan(s)	\$	Saving / Money Market	\$
Credit Cards / Installment Loan(s)	\$	Stocks / Bonds / CDs	\$
Health Insurance/Medical	\$	IRA / Keogh Account	\$
Student Loans	\$0	401k / ESPO Account	\$
Child Care Support / Alimony	\$	Home	\$
Food / Spending Money	\$	Other Real Estate	\$
Water / Sewer / Utilities / Phone	\$	Cars	\$
HOA / Conda Fees / Property Maintenance	\$	Boats	\$
Auto Expenses	\$	Life Insurance	\$
Life Insurance Payments	\$	Other	\$
Entertainment/Discretionary	\$		
Flagstar Loan	\$		
Charitable	\$		
Total	\$	Total	\$

**LIEN HOLDERS**

If there are additional Liens/Mortgages or Judgements on this property, please name the person(s), company or firm and their respective telephone numbers.

Lien Holder's Name			
Balance \$	0	Interest Rate	% Phone Number
Balance \$		Interest Rate	% Phone Number

**FINAL INSTRUCIIONS:** 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.
4. 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.

Flag star 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)

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financial status as of the date of my (our) signature(s) below. I (we) understand and acknowledge that any action taken by Flag star 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 Flag star 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 Fiaqstar's debt collection process.  
All information obtained relating to this form will be used for that purpose.

Borrower Printed Name

Borrower Signature

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Co-Borrower Printed Name

Co-Borrower Signature

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